



Veteran Perspectives on Family-Serving Recreation and Leisure Programs

RESEARCH

NASASKYIA R. HICKS 

IRYNA SHARAIEVSKA 

LYUDMYLA TSYKALOVA 

JASMINE TOWNSEND 

BRYAN L. MILLER 

**Author affiliations can be found in the back matter of this article*

VIRGINIA TECH.
PUBLISHING

ABSTRACT

Reintegration is a challenging process for veterans returning to civilian life with various individual and family needs. Recently, recreation and leisure programs have become more popular as a viable alternative to the comprehensive care provided by the Department of Veterans Affairs. Despite the growing use of recreation and leisure programs for veterans and their families, little is known about their potential benefits during reintegration. This study elicited the perspectives of veterans participating in recreation and leisure programs provided by America's Warrior Partnership. Eighteen interviews were conducted with veterans who expressed multiple individual benefits, including, but not limited to, relaxation, acceptance, and comradery. The families of veterans also experienced benefits related to improved family communication, establishment of new roles, emotional responses, and reconnection.

CORRESPONDING AUTHOR:

Dr. Nasaskyia R. Hicks

Clemson University, 321
Calhoun Drive, 130 Brackett
Hall, Clemson, SC 29634, US

Nasaskh@clemson.edu

KEYWORDS:

veterans; families; recreation and
leisure programs; reintegration

TO CITE THIS ARTICLE:

Hicks, N. R., Sharaievska, I.,
Tsykalova, L., Townsend, J.,
& Miller, B. L. (2025). Veteran
Perspectives on Family-Serving
Recreation and Leisure Programs.
Journal of Veterans Studies,
11(1), pp. 80–94. DOI: [https://doi.
org/10.21061/jvs.v11i1.675](https://doi.org/10.21061/jvs.v11i1.675)

Each year, around 200,000 US military service members and veterans (MSMVs) reintegrate into civilian life and, unfortunately, up to 62% of them may encounter reintegration problems (Romaniuk et al., 2020; US Department of Veterans Affairs [VA], 2023). Reintegration back into civilian life can be complicated for transitioning veterans, and the process becomes increasingly more difficult when compounded by access barriers to comprehensive care and treatment for those in need (Elnitsky et al., 2017). One of the main challenges to providing adequate care for MSMVs separating from military service is identifying appropriate programs to meet their mental, physical, and social health needs (Hester, 2017). Fortunately, there have been ongoing efforts by researchers in recent years to understand which Veteran Affairs (VA) and non-VA programs effectively address the health and well-being concerns of newly separated veterans. The Veterans Metrics Initiative (TVMI) is a longitudinal cohort assessment of 9,566 US veterans tracking domains related to health, vocation, finances, and social relationships up to 3 years after military separation (Vogt et al., 2018). Additionally, research funded by the US Department of Defense (DoD) has been dedicated to understanding veterans' mental and behavioral health needs transitioning back to civilian life. Specifically, The Army Study to Assess Risk and Resilience in Servicemembers-Longitudinal Study (STARRS-LS) focuses on reducing the risk of suicide, among other mental and behavioral health challenges (Ursano et al., 2014).

In 2020, as many as 5.2 million MSMVs returned from deployment experiencing post-traumatic stress disorder (PTSD), substance use disorders (SUDs), depression, and anxiety (Fink et al., 2022; Owens, 2022). Reintegrating veterans also experience a high prevalence of physical and chronic health challenges from service-connected injuries (Sprong et al., 2023). According to the US Census Bureau (2024), roughly 30% of all veterans reported a service-connected disability in 2022, increasing from 15% in 2008. According to Gundlapalli et al. (2020), service-connected disabilities remain high among post-9/11 veterans, who are experiencing long-term impacts from the conflicts in Iraq (OIF) and Afghanistan (OEF). One study of post-9/11 veterans with traumatic brain injuries (TBI) found an increased risk for post-traumatic epilepsy (Pugh & Foundation for Advancing Veterans Health Research, 2019). Similarly, a retrospective observational cohort study of post-9/11 veterans with TBI and 3 years of VA care indicated that these veterans experienced more challenges during social, family, and community reintegration than those without TBI (Pugh et al., 2018). Other health-related concerns among post-9/11 veterans, such as respiratory illnesses (e.g., chronic lung disease and asthma), are increasing (Pugh et al., 2016). Further, combat veterans

experience a higher risk of stroke than noncombat veterans (Thomas et al., 2017). Over the past 5 years, homelessness and unemployment have affected about 3.7% of veterans (VA, 2023). Social problems such as social isolation and interpersonal connection are also common among reintegrating veterans (Taylor et al., 2020). Moreover, these individual challenges, often intensified during the transition process, are commonly experienced by the entire family unit, including spouses and children. Military families frequently face difficulties with reconnection and may benefit from additional support services to facilitate their adjustment (Hawkins et al., 2018; Taylor et al., 2020).

Family members are critical to the successful reintegration of veterans back into civilian life and often serve as caregivers for those with service-connected disabilities and other mental and behavioral health issues (Boucher et al., 2021). The family caregiving system is vital to improved health outcomes for veterans, and there is a growing body of research on the benefit of inclusive care for veterans and their families by incorporating them into case plans and services (Leykum et al., 2022). However, the needs of spouses and children and the challenges experienced by them are often overlooked by service providers focused on reintegrating veterans.

Managing service-connected physical and mental health issues while helping veterans and their families successfully transition requires vast support from organizations committed to ensuring a successful reintegration process for veterans and their families. For the estimated 25% to 56% of veterans with challenges to their psychological health and no comprehensive plan of action or treatment services in place, removing barriers and connecting them with adequate support is essential to ensuring their successful transition (Sayer et al., 2014). Thus, addressing the mental health needs of the 23% of veterans diagnosed with PTSD and other psychological conditions and expanding access to untreated veterans and those experiencing other reintegration challenges remains a top priority (VA, 2023).

There are a growing number of veteran-focused adaptive sports and recreation programs in the United States (Townsend & Whaley, 2024). In recent years, recreation and leisure programs—outdoor, therapeutic activities to improve mental health and overall well-being—have been used to supplement the demand for governmental assistance and increase the availability of alternative programs to support veterans and their families (Duvall & Kaplan, 2014; Townsend & Whaley, 2024). As of 2016, there were over 300 million recreation activities for veterans (Petersen, 2016). A systematic review of combat veterans participating in sports and physical activity indicated subjective well-being and improvements in coping skills, PTSD symptoms, and quality of life (Caddick

& Smith, 2014). While recreation and leisure programs provide various benefits to those who participate, little is known about the effectiveness and benefits of recreation and leisure programs for veterans and their families.

Only a few studies have explored veteran perspectives of family-serving recreation and leisure programs during reintegration. Fischer et al. (2015) examined the perceptions of veterans and their families transitioning to civilian life, their interest in joint veteran and family programs, and their desired family program content. Hawkins et al. (2018) also explored the impacts of a recreation-based military family camp on family functioning. More recently, Hicks et al. (2024) examined practitioners' perspectives on recreation-based programs for veterans and their families. Building on Fischer et al. (2015), Hawkins et al. (2018), and Hicks et al. (2024), this study aimed to explore veterans' perceptions of family-serving recreation and leisure programs to identify benefits experienced by veterans and their families.

RECREATION AND LEISURE PROGRAMS

Veterans' interest in recreation and leisure programs has increased for those seeking alternatives to VA support services (Fischer et al., 2015). The positive impacts of recreation and leisure activities, such as outdoor-based therapeutic recreation (TR) programs, on the well-being of children and adults in various settings have been well-documented by research (Herrmann et al., 2023; Hulteen et al., 2017). Outdoor-based TR has aided in the recovery of individuals with mental health problems (Lackey et al., 2021) and improved their physical functioning, including weight loss and cardiovascular health (Castagna et al., 2020). Older adults participating in recreation and leisure reported enhanced cognitive functioning and subjective well-being (Kuykendall et al., 2018; Sala et al., 2019). Engaging in leisure time, such as sports and other physical fitness activities, has also been associated with a better quality of life (Kim et al., 2017) and life satisfaction (Litwiller et al., 2017), while sedentary activities like watching television and computer use were associated with a negative impact on cardiovascular health and mortality (Djousse et al., 2021).

Research indicates that recreation and leisure programs can significantly improve psychological well-being among veterans with PTSD (Wheeler et al., 2020). As supported by Vella et al. (2013), who examined a 2-day/3-night outdoor recreation program where 74 veterans participated in fly fishing. Their findings indicated acute psychological effects, showcasing improvements in mood, attentiveness, anxiety, stress, and depression. Similarly, a systematic review that examined the relationship between outdoor-based TR programs among veterans with PTSD found short-term

improvements in psychosocial health, including stress, depression, and life satisfaction (Greer & Vin-Raviv, 2019). Townsend et al. (2018) revealed long-term outcomes of recreation-based health and wellness programs for injured service members, which included positive psychological health changes. While these studies make important contributions to the literature surrounding recreation-based programs for MSMVs, they are limited in scope as they only examined outcomes related to the individual veteran and did not include family perspectives.

THEORETICAL FRAMEWORK

Building on Bronfenbrenner's (1979) socioecological framework and Strauss's (1987) approach for qualitative research, this study employed the ecosystem of support theory to explore whether the family programs offered by the participating organizations supported the expressed individual and family needs of reintegrating veterans. Bronfenbrenner's (1992) ecosystem of support posits that the interconnectedness of various support systems is essential in shaping one's experiences and ensuring positive outcomes. This theory explains how a network of services and programs benefits veterans, their spouses, and children by addressing their needs through family-centered programs. Additionally, the family ecology framework lays the groundwork for understanding how children and family members support the caregiving system (Pedersen & Revenson, 2005), which affects the overall health and well-being of reintegrating veterans. Since children play a vital role in the caregiving system, evaluating their experiences in tandem with other family members showcases their stressors by providing a more accurate picture of family functioning and overall well-being (Kalvesmaki et al., 2024). Further, the research team used the McMaster Family Assessment Device (FAD) to guide the development of the interview script (Epstein et al., 1983). FAD is comprised of seven subscales of family functioning: (1) Problem-Solving, (2) Communication, (3) Roles, (4) Affective Responsiveness, (5) Affective Involvement, (6) Behavioral Control, and (7) General Functioning, which was used during interviewing to understand the benefits of family-serving programs to veterans and their families (Cong et al., 2022).

METHODS

This project was conducted by an interdisciplinary team of researchers who contributed various areas of expertise, including, but not limited to, veteran affairs, family research, programming, therapeutic recreation,

and qualitative research. The project was approved by the Institutional Review Board (IRB) of Clemson University (IRB Approval 2021-0012). All participants received written informed consent and information about the potential risks and benefits of participation in this study. Their verbal consent to participate in this study was received at the beginning of each interview. All respondents received a \$100.00 Walmart gift card for their participation. A purposive sampling technique (Riddick & Russell, 2014) was used to reach out to veterans and their families who participated in America's Warrior Partnership (AWP) family programs. The authors would like to note that participation in such programs was the only selection criteria used in this study. The information about family-focused recreation and leisure programs was gathered from the AWP website (<https://www.fourstaralliance.org>), and the information about this study was distributed through the AWP (n.d.) Network listserv. AWP is a national organization that provides various resources to veterans and their families, from recreation and leisure programs to support services.

One of the authors (I. S.), who has extensive training and experience in qualitative methods, conducted 18 in-depth, semi-structured interviews, each lasting approximately 1 hour, via phone and Zoom® conferencing platform during the spring and summer of 2021. The interviews followed the guide of questions, that asked veterans to reflect on the family programs they participated in (e.g., details of the experience, benefits, and disadvantages). They were also asked to recommend the programs they wished they could participate in. While the interview followed the script, many questions were open-ended; for example, "What other veteran family programs would you like to be offered to your family and other families like yours?" The question related to the program's benefits was developed with McMaster's FAD in mind (See Epstein et al., 1983). More specifically, the participants were asked: "Reflecting on your experiences with veteran-focused programs, were there any activities/programs that addressed the following areas: increased interest in each other's activities and concerns, the ability of family members to show appropriate emotional response, establishment of family rules and standards regarding each other's behavior, improved communication skills, re-establishment of roles and responsibilities in the family, and improved problem-solving skills?" While these prompts were listed to each participant, the interviewer first asked an open-ended question about any benefits the interviewees and their families obtained from the programs, which was phrased: "Was this program helpful for you, your partner, and your family, and in what way(s)?"

Interviews were voice-recorded and transcribed verbatim using the Zoom automated transcription feature. All data were de-identified, and the participants were

assigned a one-up code (e.g., Veteran 1 and Veteran 2) based on the order of their participation in the project. The data analysis was performed by two authors (I. S. and B. M.), who followed Charmaz's (2006) coding technique, which included open, focused, and axial coding. Sentences were analyzed, reviewed, and revised line-by-line until themes emerged (Charmaz, 2014; Corbin & Strauss, 2008). Data analysis concluded once saturation was reached, and the authors engaged in a collaborative coding process, jointly identifying, discussing, and developing the main themes (Lune & Berg, 2017). This qualitative process aligned with Charmaz's (2006) recommendation for credibility, originality, resonance, and usefulness in research.

RESULTS

The participants in this study were comprised of a diverse group of veterans. Among the 18 participants, 12 were males and six were females between the ages of 30 and 74. Most participants self-identified as White/Caucasian. Three identified as fully or partially Hispanic or Latino, one identified as African American, and one identified as partially Native American. Twelve participants were married, four were divorced, one was separated, and one was cohabiting with a partner. Three participants reported having no children, while the other 15 reported having between one and six children, many of whom were adults and no longer living in the same household. Most participants reported to be either retired, unemployed, or students with only one participant reporting to have employment in the field of communication. While all the participants were invited to include their family members (e.g., spouses and children) in the interview process, only one participated in the study with their spouse, who was also a veteran.

The participants reported multiple benefits from involvement in family-focused recreation-based programming at both the individual and family levels. Some individual benefits included relaxation and escape, motivation to be active, a sense of acceptance and clarity of identity, and a sense of comradery with peers. Family benefits included a focus on the family unit, the opportunity to bond and establish trust, setting new roles with a spouse, learning communication skills, learning about each other's interests, a better understanding of mental health and appropriate emotional response, and having the opportunity to learn from peers and other families.

THEMES: INDIVIDUAL BENEFITS

Relaxation and Escape

The veterans in this study referenced benefitting from relaxation, escape, and general reset resulting from

leaving their regular life and its routines and going on a mini vacation with their partner and family. They reported that participation in family programs helped with feeling better, which allowed a sense of general healing, reset, and getting back on track, which resulted in a natural sense of calmness, peacefulness, and openness. As Veteran 9 explained, leaving their daily environment and errands behind allowed them to “Focus and isolate a couple of things that you want to work on in a relaxed place, in a relaxed manner, and some fun things to do... there’s a balance of fun.” Veteran 3 reported that both himself and his family benefited from such an experience:

I was in a pretty dark spot, and [...] it definitely helped me and my family to get through a lot. [...] I didn’t realize I was going through a lot, but I was. It didn’t heal everything, but it definitely helped get me in the right direction...got me back on track—extremely therapeutic.

Motivation to be Active

Since many family programs exposed veterans to various types of outdoor and active recreation, the veterans reported that they gained a boost of motivation to be active. Multiple reasons were presented as useful when it comes to helping veterans to be more active. Some veterans were introduced to adaptive recreation, which helped them continue participation in activities they loved before sustaining their injuries. For other veterans, the programs provided an additional push to deal with mental health challenges. Finally, the programs provided veterans with expert support, which removed that responsibility from their partners. For example, Veteran 2 explained:

Yes. Yes, it was...it was a definite change of becoming more active. It was the re-inclusion of public contacts. Definitely pulled me out of my way. Now, I’m not saying it was 110%, but there’s days that you...you’ve got to stay home, and you gotta stay out of the limelight, stay away from people. But those programs gave you enough incentive with your mate to say, you know what, I think I can do this, let me give it a chance, and that’s how we would do it.

Similarly, Veteran 3 described his experience with his girlfriend, stating, “We love to do activities...I need a guide and she’s able to...we tried together on our own, and it works out sometimes. But because of fights and frustration, going and having that expert having the guidance.”

Sense of Acceptance and Clarity

Some veterans reported that family programs helped them experience a sense of acceptance and clarity, whether it

was related to their traumatic experiences during service, a new identity or status as an individual with a disability, or a spouse who is no longer willing to work on their relationship. Veteran 2 shared:

It also gave us, of course, later on, clarification gave us [sic], it was like, it ain’t... it ain’t gonna work between us. So, it allowed us both to move on freely. You know, and it just gave us that opportunity to really reflect back on and say you’re not...it’s not that I don’t love you or care for you, it’s just we aren’t compatible anymore. And so it was easier, I think, for a lot of people that way.

Veteran 3 described how being a part of the family program allowed him to accept his disabling condition and start building a new identity, stating:

Just I’d say...it’s helped me really I guess, accept the blindness and kind of realize where I’m at and where I need to go. So it gives you that acceptance and helped me suck up a lot of my pride and opened your eyes that it’s okay to do certain things. Definitely amazing life lessons.

Other veterans came to some level of acceptance of having anxiety, acquiring an injury that made them give up the identity of an extremely strong member of the family, and even allowing a family to start processing an incident of sexual assault. Spending time with other veterans in the family program allowed family members and friends to better understand new identities developed by the veterans during service. Veteran 8 described:

It helps them to...again, normalize how I am. Like...my friend was like, ‘Why you are standing like a soldier?’ And I’m just like...but when we get around other soldiers and he sees them standing... or veterans and he sees them standing the same way, he’s like, ‘oh, you all just do it.’ So, I mean... that’s a light example outside of trauma, but it normalizes...for new people in my life...and even for people who’ve been part that it helps them see how I’m different than when I served and I... and part of it I’m grateful for is like they back off now is like, they’re not expecting me to be the way I was. They’re just kind of like understanding it’s different.

Moreover, by providing family members with an opportunity to see veterans being physically active despite the acquired disability, programs helped veterans retain the identity of a strong and capable individual. Veteran 10 shared:

It's helping me have a better relationship with my family. They are seeing me also as someone who is capable, and oftentimes what they see me here, I'm in constant pain, I can't feel much below my knees and it...but what I do feel are needles and burning like my legs are on fire, and it's been 10 years now, [a] little over 10...and very little takes care of that. But it's always there in my head, so when I'm at home, they can see me trying to hold back tears, and 'What's going on?' and they're always concerned, but they see me climbing the wall, and they see my kayaking in whitewater, or something they wouldn't do. Then I... I am more vital. It'll lay hope within them, 'He's not dying, at least not yet.'

Sense of Comradery with Peers

Although a sense of comradery with fellow veterans was not the main goal of family programs, many veterans commented on how much they appreciated an opportunity to reconnect and gain a sense of community they once felt with their peers. For example, Veteran 2 stated, "What I loved about it was it reinstituted or reintegrated that...little missing key in my life of camaraderie, you know. Not so much with my spouse, as it was so much more with my fellow warriors." Many veterans described a sense of appreciation for the opportunity to share their experiences, growth, and feelings with those in similar situations. Veteran 7 shared:

Just being with people that went through what I went through in the military—and they recognized what I went through and we just kind, I don't know how you want to say it... just kind of clicked and connected and supported each other, that's what I wanted to say."

Veteran 13 explained that a sense of belonging comes from shared culture (i.e., language, norms, understanding without a need to explain), stating:

Oh, I think folks who are in the military have a lot of common experiences and the way we tend to look at things is very similar, and you don't have to spend too much time explaining something to somebody because you have a lot of common experiences and terminologies that...comfort zone I guess.

While a sense of belonging and shared culture provided veterans with benefits, so did the "tough love" the veterans were willing to give to each other. Veteran 18 described:

Sometimes talking to your battle buddies is better than talking to any psychologist in the world. You

know because we get it, we know [...] you can tell somebody you're a victim all day long, and they're gonna start believing it. So, you can tell a veteran, 'Oh, you're a disabled vet, you're disabled vets, oh yeah, and do use your statuses,' and they might not even psychologically realize what they're doing, and they use their status of a disabled veteran combat vet as an excuse for bad behavior and that's what's so good about vets being among vets, these guys like 'Oh...well shove it in your ear dude I've been there too.' I said 'Have you seen me cheating on my wife? No.' You know, you see what I mean? That kind of thing, I mean, we can keep each other in check better.

Finally, several veterans mentioned that they appreciated the time spent with other veterans because it provided them with an opportunity to serve. Veteran 15 stated:

Getting...out and together with veterans is nice. Being able to encourage other veterans to get out and do things. That's kind of what I try to do, to learn different sports. Get used to different sports so I can do them. Meet others [and] help them.

THEMES: FAMILY BENEFITS

Focus on the Family

Most veterans expressed appreciation for the programs, noting how they brought their families closer together. Whether helping them to better connect with their spouse or expose their children to new experiences, the veterans found these programs were beneficial for the entire family. Veteran 3 shared, "Yeah, we went through stuff, but they go through stuff too. Family integration is key." Veteran 1 explained that the whole family should be a part of the transition and rebuilding process, stating:

But it was neat how they incorporated the aspects of bringing the family, the parents, mom, and dad, which is the base of the family unit...then the kids back in as you know, the progression of that family unit throughout the weekend of kind of thing. I thought that was smart how they did it and in what the overall purpose was...to rebuild the family from the top down.

More specifically, several veterans believed that their spouses benefited from the programs by decompressing and lowering the stress associated with their caregiver roles, allowing each couple to spend quality time together without focusing on daily responsibilities. Veteran 2 explained:

It was a stress reliever. When your spouse...either spouse has to deal with someone combat wounded, PTSD severe, etcetera. They finally can let their hair down and not be the caregiver, not be the... the vigilant advocate at the VA for anything else; you can actually enjoy quality time together doing whatever activity.

Moreover, when spouses were able to spend time in the company of other veteran families, it helped them to understand their veteran spouse better and see some of their struggles as typical among families like theirs. Veteran 9 stated:

But it was important for my wife to meet other spouses. She doesn't know a lot of other spouses of veterans, and for her just to be able to hear their struggles and hear our situation isn't different, or it's not this strange thing, you know. She feels like she didn't grow up in a military household or family like that or something that I grew up with military tradition in our family that we were accustomed to. She's felt really she doesn't understand some of the problems that we have as a couple. They come from, you know, her being a veteran's wife in a veteran's family. You know, and they're just they're normal in ours, our community, and they're not that alarming.

Finally, several veterans believed that their children needed opportunities (i.e., family programs) to help them process some of the experiences they were going through with the assistance of a professional since the veterans themselves were often not equipped to do so. Veteran 18 stated:

Veterans are not going to have...the social, the psychology background to be able to talk to their kids. They might not even understand what they're going through so that transition helps a lot; there's a high, high divorce rate in the military. There's a high drug use among the kids because they can't cope.

Sense of Trust and Bonding with a Spouse

The strong focus on the entire family and the importance of family highlighted by the programs allowed participants to reflect on their relationships with their spouses and promoted opportunities for bonding. Veteran 11 shared his story and appreciation for the program that helped him reconnect with his wife, stating:

Our problem is when we're apart. We just hated being apart. We were great together, so it was really hard on my wife; it was hard on her being a part of

that. So, we really, really needed it, the marriage retreat when I came back, and so, going through that, I think that saved our marriage. I really do.

Veteran 3 shared a similar sentiment, stating, "For me and my girlfriend, it brought us closer together. Life's stressful, you go through all kinds of stuff, and it's a way to get away. We bonded while we were going through something else." Several veterans shared that the sense of comradery and bonding with their spouses resulted from more targeted educational sessions. Veteran 6 explained, "A lot of it was... the vulnerability of it. That kind of made the sessions a little better where some of those walls were broken." Others referred to some form of active recreation to initiate a mind shift and enhance bonding with their spouse. Veteran 2 stated:

You get the aspect of counseling but, yet you also get the physicality of confidence courses like we did a ropes course in Lake Tahoe area. You know, you're swinging from trees that are 150 feet in a harness with, you know, with your mate, and they're freaking out because they've never done that before. You jumped out of helicopters into freaking water, you know, and they're just like, 'Oh my god, you're like,' well, 'Welcome to my life, this is...what I used to do for a living.' and [...] it formed a sense of camaraderie between your mate and you.

Veteran 10 described how some outdoor activities promoted that sense of trust and bonding simply due to the nature of the activity, stating:

I mean, nothing needs to be said because it's implied in the activity [rock climbing] and same with the kayak. So yeah, I...think when you have opportunities in our daily life, typically going to the store, going to the restaurant, or everything else, and I trust you're going to buy the bananas, or I trust you're going to buy my meat, you know what I mean. That's nothing! In a kayak where you're scared to death of drowning, or up on a wall with someone holding you, those are truly trustworthy things...and no matter what [my wife] knows that she held me up [on a climbing wall], she had that experience of me feeling safe in her hands and that's a...separate thing it's usually the other way around, and so, she has me, and she knows I trust her.

Learning about Each Other's Interests

The opportunities to bond and spend concentrated time with one's family allowed veterans and their spouses to

learn more about each other's interests and find activities they could do as a couple. The programs provided the necessary time and space for couples to reconnect and talk about their needs and preferences, which often does not happen on a regular basis due to daily routines and the busy schedules of family members. Veteran 6 shared:

You know, it kind of gets into what activities interests you, what hobbies do you have, what things to bring you together, what opportunities do you want to explore together... so you know, that's a pretty big fundamental most of the couples-related stuff that I've done.

Exposure to new activities allowed veterans and their families to identify new interests and evaluate some limitations. Veteran 5 explained:

Yes, and when I did the [Name of the Program], they had a lot of programs together where it helped me to understand where his interests were right then, and he was able to be there supporting me physically. Me getting sick kind of forced us into all sorts of new interests, and that program helped us see us doing it.

Veteran 13 shared a similar experience, stating, "I learned that my wife enjoys to play tennis at tennis camp. Neither one of us did that, so we both learned that that was something we enjoy doing together." Similarly, Veteran 10 shared,

I learned that my...wife was terrified of water. I mean, because she was almost drowned when she was a kid. She was under the water seeing the light go down, so she was terrified of it, and learning that really helped me understand her [...]. So, I would say that was one specific thing is where they asked her, and she answered, and I would have never known to ask, 'Is there any issues you have with water or anything everything else,' and...she answered, and I was like 'Hey I didn't know that!'

In addition to learning about each other interests as a couple, several veterans reported learning about the interests of their children. Veteran 16 stated:

Well, when we went to the different programs and stuff, we learned what the kids like to do and what they don't like to do. We found out that my daughter really liked to ride the recumbent bicycles. She had a lot of fun riding those. She never really got the hang of riding a two-wheel bike and always wanted

to. But she can ride a recumbent bike, and she was zooming around. She absolutely loved it.

Communication Skills

The overwhelming majority of veterans in this study highlighted improved communication skills as a benefit of family programs, whether these skills were explicitly taught or encouraged through various activities. Moreover, all the veterans discussed the overwhelming importance of better communication skills for themselves and their relationships with family members. Veteran 12 explained:

Well, I feel like it always boils down to communication. Everything does and the better that you're able to express your needs and your wants and where your levels are for that day, the better those can be heard and received. But I think the program, you know, put due diligence towards making that more accessible for the couples.

Similarly, Veteran 2 stated:

These programs actually assisted in renewing the art of communication, and it went deeper because if you communicate...if you can communicate effectively, you're not only talking to another or a mass, you're talking to yourself, and it's through that self-discovery that you learn, you know, this is what I am, and I have it on there it says, 'acceptance is peace.' So, by these programs allowing me to participate, my spouse to participate, I was able to grab the greater respect for acceptance.

For some veterans, the communication had to be re-established due to long separation; however, for others, it was related to the burden of daily life. But for some, it was an outcome of traumatic brain injury and other experiences while in service. Veteran 16 explained:

Yes, because it was through this...that program, and if it wasn't for that program, we'd still be having these...major arguments about nothing, really, because we most of the time, we are talking about the same thing. Or we have the same idea. But my brain is not registering that it's the same thing.

Transitioning from military to civilian life could enhance difficulties in communication, especially when it comes to communication with children. Veteran 4 stated:

Yes, because I will tell you that I enlisted when I was 31. For me to be a civilian all my life and then

be considered militant. So, when I talked to the kids, my mom was telling me one time in the car she's like, 'She's 5 years old,' and I go, 'That's right, okay I gotta remember I'm talking to a little kid.'

Appropriate Emotional Response

Closely related to healthy communication skills was learning about appropriate emotional responses to their spouse, another benefit of the family programs discussed by the participants. Several veterans referred to various ways these skills were discussed and practiced—from formal class to playing out scenarios to discussions and setting rules with one's spouse. Veteran 6 shared:

Yeah, some of that rule setting is you know, I'm taking a time out. We're going to time out on this because I'm getting upset, you're getting upset. Some of this is also that you know, if I see you doing something while we're having this conversation start bother me, I will tell you. Whether it's faces or something that they're doing, something like that. [...] So, you got a basic toolbox, have some skills, you know...three to five things that you can do to kind of keep conversation from being too heated or overly emotional in a negative way.

Veteran 10 discussed his experience of participating in the water-based program with his spouse and how he learned to respect his wife's decision not to escalate the difficulty and risk of the activity by observing the reaction of recreation professionals to his own decisions, stating:

I guess I learned from...how they [recreation providers] responded to me. [...] I'm doing whitewater class three, and there's a...you know, there's a bunch of classes...class three is pretty rough for me, and I don't want to even maybe do that [...] But I may...I'll probably do that, and she has no interest in it, really. I mean, she'll come out and support me but she ain't gonna whitewater, you know. She'll go on flat water, but she ain't whitewatering so. And there are boundaries there. I said, 'are you really sure?' I mean you know...you know and...and she outlined why, you know. So,... and I think being taught, without knowing, through the programs you're taught as a level of acceptance and again, if your ego's not into it, she's not going because she didn't,...she doesn't like me.' No. She's scared to hell of water and...frankly, I am too. It's just I'd better trained. So, I mean, I think learning to accept others' boundaries.

Whether by practicing the "challenge by choice" rule or discussing specific skills to stop "thinking traps," family programs provided families with valuable skills of emotional intelligence.

Setting New Roles

Several veterans in the study discussed the change of roles in their families because they acquired a disability and how family programs were often useful in establishing new ways to share daily responsibilities. For example, Veteran 5 shared:

I guess all of the programs have helped with that because it has helped show him...it emphasized with him that through his actions that he is pretty much my caregiver. But also, it's like allowed us, where we have given him responsibilities as my caregiver...it was okay to pull back some of those responsibilities. He doesn't have to be everything all the time. He can give me responsibility too. Everything doesn't have to live on his shoulders.

For some participants, the programs were useful in helping with the transition back into family life. Veteran 14 shared:

I think we read a couple books that were issued to both of us. Like different stages of transitioning like, I know that when I came back from deployment, I was eased into the parental role. While I was deployed, my wife was mom and dad. She was the end all, be all. Afterward, when I came in, we had to coordinate more because sometimes the kids would kind of pit us against us, as in, 'But mommy said this and you're saying that' and stuff like that [...] to like help us coordinate. To not contradict each other. Sometimes I'll say this, and my wife will say, 'Yup, that's what your dad said that's what has to be done.'

Unfortunately, this specific benefit—setting new roles—was experienced very differently by different participants. On one hand, several veterans reported that while the issue of setting new roles was discussed as a part of their family programs, they did not benefit from such discussions as a family unit due to different stages in family life (e.g., kids were too small) or due to different conditions of their service (e.g., never deployed), or due to being past the transition stage of their service (e.g., out of the service for a while). On the other hand, there were several veterans who could benefit from role-setting activities, yet the family programs they were a part of did not provide such an opportunity. For example, Veteran 2 explained:

In my experience, we were two highly educated individuals, and we could have amazing, articulate debates and...just throw stuff back and forth, and we were very creative too... Being wounded, to me, basically being a zero. [I am] unable to really communicate on my end, and she lost her communication skill set and dumbed it down. So that at...one point, she transitioned emotionally and metaphysically into a caregiver, a pocket nurse, and [...] it destroys a man's ego and it just...it emasculates an individual, for a male...and that, in itself, if you allow it to become the norm...You know she...I remember she would tell me, even on our wedding day, in her speech she says, 'I'm married to you because you're 110% man; there's no backing down on you,' and when we divorced, she said, 'I really hope you get to be that person again' and so, that was a main contributing factor.

Veteran 18 shared a similar sentiment about the transition into the family and finding a new balance, stating:

No, and it needs to be because it's kind of tough if the spouse has been handling everything, and then the war hero comes and I've seen this the war hero comes home, and everybody's like, 'Oh you're a war hero and all this other stuff and I'm here to run things...well what do you think I've been doing this last 16 months?,' and that can cause tension, and I think that would be an excellent program.

Although, unfortunately, it did not happen for all families, opportunities for bonding and time for reflection, as well as improved communication skills, could all help enhance the clarity of roles and provide spouses with more opportunities to discuss and redefine roles in their families.

Mental Health Education

Since many veterans' mental health is affected because of experiences they had in the military, mental health education was named as a valuable benefit of the programs. A better understanding of oneself and their spouse allowed participants to not only normalize newly developed challenges they were dealing with but also acquire tools to deal with them. Veteran 5 explained:

They actually went down, 'Hey, these are symptoms of PTSD', and he was able to go, 'Oh, when she's behaving like this, and she never did before... it's not me.' It's not him causing that, and it's also 'Okay, this is normal, we're going to get through this.' It was able to help find a cause.

Veteran 9 shared a similar sentiment, adding that the program provided him an opportunity to openly speak with his wife about the persistence and hard work dealing with trauma can require, stating:

That's something I've worked though, work through constantly with taking medication and my own therapy. That it doesn't reflect anything that she's doing. It reflects my emotional state. So, clearing up to her that in our relationship that this is, this is how to understand me ... and then, from me reassuring her that I'm trying to do everything I can to, like, deal with those symptoms. Instead of 'I'm just, ya know, this is how it's going to be forever.'

Veteran 18 also explained the importance of discussing mental health with children and providing them with an opportunity to better understand and process the reality in their own families, stating:

We went to one, and it went into detail about PTSD and what it's like to lose a limb, or like when I got blown up, I mean, I'm just now able to walk and stuff like that again. They get it; it opened up my daughter's eyes, so instead of thinking, 'Well mom's weird or dad's weird' and having negative aspects about giving sacrifices to your country, they went and 'Okay, these are the effects, this is the long-term effects that can happen, these are the short-term effects,' and they did it in a good atmosphere [...] they would cater it to different age groups [...], and so, it helps them to understand, and they get a chance, it gives the kids and the teenagers...more teenagers, a chance to express themselves to see how that's affecting them if they can get some help working through that.

Learning from Peers/Other Families

Finally, interactions with other veteran families were beneficial not just for veterans but for the entire family. Similarly, being introduced to mental health education brings the realization that other families experience similar challenges, which fosters normalcy and decreases judgment. As Veteran 5 stated, "Yes, [in] all of the programs people are very open. A lot of times people talk about what they're going through. Able to hear people talk about it, normalized it." Moreover, hearing about a challenge from someone else allowed veterans to have an outsider's perspective and see the situation in a more rational way. Veteran 6 explained:

You see someone's façade chipped away, where people behavior out in public, but as I get more comfortable, those issues come out. Especially when

they hear other people open up about their issues. So, it gives you that perspective. Say, 'Okay, they're dealing with some of the same stuff I am that's how they're responding to it. They responded the same way I am, that's causing problems. They're not looking at it, at the way that they should, or we're not looking at it.'

Similarly, Veteran 2 provided a specific example, stating:

If you just listen and you watch while you're participating, one individual can pop off of a total wise-ass crack to his mate, and it's like the mate goes, 'Now, you need to stop it,' and he'll reply back something, like, 'Kiss my ass, I'm a grown man, I do what I want.' [Then] all of a sudden, it clicks in you, 'Wow, how many times did I do that to her? I am normal.' You know? and... so it... I think it is, on a sociological standpoint, it's just through observations while participating that you get a lot of experience from that.

Other veterans said they learned about specific techniques that worked for other families when it came to relationships between spouses or relationships with children. They received advice from people they respected or even learned about benefits available for their family. Veteran 16 shared:

Definitely, whenever you get a group of veterans together, we always like to swap stories...especially when you're in a structured environment like that [...]. The classes are made so they're interactive-type classes. So, the child-rearing, or talking about the kid's class. They'd be talking about..."Has anybody had any problems with a child? Say, 'Mom said I could stay up 'til 10 o'clock, and you weren't here, so I'm going to stay up until 10' and now dad is home from deployment, and he wants them to go to bed at nine. How do you deal with this?'" People open up the floor and talk about how they deal with that situation. You hear different people's input on it.

Both individual and family level benefits were experienced by some veterans and not others, and different veteran families may have different needs, depending on their health, stage in family life, presence or absence of children, timespan after service, and many other factors. The programs may use a more specialized approach by either narrowing down their target audience when planning and organizing the programs or using a track approach within a larger and more general group of veterans by providing families with an opportunity to build a program plan that could be helpful for them.

DISCUSSION AND CONCLUSION

In line with Fischer et al. (2015), Hawkins et al. (2018), and Hicks et al.'s (2024), we found that the participants in this study expressed multiple individual and family benefits from participating in recreation and leisure programs. Individual benefits ranged from relaxation and escape to general reset. More specifically, the participants felt motivated to be active and developed a sense of acceptance, clarity of identity, and a sense of comradery with peers. Sharing these outdoor experiences with other veterans experiencing mental health and physical injuries also helped build comradery and connectedness among veterans. The participants expressed the upsides of relaxing and taking a break from daily obligations, which included carving more time for family bonding. Further, they increased physical activity through participation in outdoor programs, which fostered a sense of normalcy without focusing on their service-connected injuries.

When asked about the family benefits, the participants expressed the desire to reconnect with their families and rebuild the strained bonds caused by separation during deployment. They were hopeful that the recreation and leisure programs could help improve family communication, support the successful reintegration of veterans back into the family, establish new roles, and promote appropriate emotional responses during times of frustration. After participation in these programs, the participants reported several family benefits, including focusing more on the family, building a sense of trust, bonding with a spouse, learning about each other's interests, reaffirming communication skills, developing an appropriate emotional response, setting new roles, mental health education, and learning from peers and other families.

Like Fischer et al. (2015) and the others, this study explored the perceptions of veterans participating in recreation and leisure programs and found the need for individual and family programming to support their reintegration back into civilian life. Overall, these programs helped veterans and their families improve physically, socially, and mentally. Veterans and their families gained vital skills that could increase family functioning and resilience. Participation in recreation and leisure programs supports the individual needs of veterans and their families, as has been argued in other research (Melton et al., 2018).

LIMITATIONS AND IMPLICATIONS FOR FUTURE RESEARCH

Despite being a reliable source in furthering the understanding of benefits associated with recreation and leisure programs for veterans and their families, this study

was limited by the number of AWP organizations included and the number of veterans who participated and provided perspectives. Only eligible AWP organizations met the selection criteria, which affected the number of veterans interviewed. The COVID-19 pandemic (2019–2022) limited the interviewer's ability to meet and conduct in-person interviews. Further, only veterans were interviewed for this study, limiting the perceptions of family engagement through the lens of the veteran spouse and children.

Based on the findings, all the participants reported gaining valuable skills from participating in recreation and leisure programs. Providing more opportunities for veterans and their families to participate in recreation and leisure programs is recommended to help supplement the need for comprehensive care from governmental agencies for those with physical and mental health-related issues. Recreation and leisure programs can help fill the gap in services for veterans, spouses, and their children by ensuring the family system is adequately supported. Veteran families are central to the reintegration process and play a critical role in supporting veterans with mental health conditions and service-connected injuries. Future work should include interviewing the non-veteran spouse and other family members to understand their perspectives on how these programs help veterans and the family caregiving system.

ETHICS AND CONSENT

This study was approved by the Institutional Review Board at Clemson University (protocol number: IRB2021-0012).

FUNDING INFORMATION

This work was funded by Clemson University Support for Early Exploration and Development (CU SEED) Grant Program and supported by America's Warrior Partnership.

COMPETING INTERESTS

The authors have no competing interests to declare.

AUTHOR AFFILIATIONS

Dr. Nasaskya R. Hicks  orcid.org/0000-0002-6926-4165
Department of Sociology, Anthropology and Criminal Justice,
Clemson University, US

Iryna Sharaievska  orcid.org/0000-0002-4539-3085
Department of Parks, Recreation and Tourism Management,
Clemson University, US

Lyudmyla Tsykalova  orcid.org/0000-0001-6579-345X
Department of Sociology, Anthropology and Criminal Justice,
Clemson University, US

Jasmine Townsend  orcid.org/0000-0003-3525-9859
Department of Parks, Recreation and Tourism Management,
Clemson University, US

Bryan L. Miller  orcid.org/0000-0002-5806-0511
Department of Sociology, Anthropology and Criminal Justice,
Clemson University, US

REFERENCES

- America's Warrior Partnership (AWP).** (n.d.). *About the Alliance*. <https://www.fourstaralliance.org>
- Boucher, N. A., Shepherd-Banigan, M., McKenna, K., Delgado, R. E., Peacock, K., Van Houtven, C. H., Van Noord, M., & Sperber, N. R.** (2021). Inclusion of caregivers in veterans' care: A critical literature review. *Medical Care Research and Review*, 78(5), 463–474. <https://doi.org/10.1177/1077558720944283>
- Bronfenbrenner, U.** (1979). *The ecology of human development: Experiments by nature and design*. Harvard University Press. <https://doi.org/10.4159/9780674028845>
- Bronfenbrenner, U.** (1992). Ecological systems theory. In R. Vasta (Ed.), *Six theories of child development: Revised formulations and current issues*. Jessica Kingsley Publishers. <https://doi.org/10.1176/ajp.151.3.445>
- Caddick, N., & Smith, B.** (2014). The impact of sport and physical activity on the well-being of combat veterans: A systematic review. *Psychology of Sport and Exercise*, 15(1), 9–18. <https://doi.org/10.1016/j.psychsport.2013.09.011>
- Castagna, C., Krstrup, P., & Póvoas, S.** (2020). Cardiovascular fitness and health effects of various types of team sports for adult and elderly inactive individuals—a brief narrative review. *Progress in Cardiovascular Diseases*, 63(6), 709–722. <https://doi.org/10.1016/j.pcad.2020.11.005>
- Charmaz, K.** (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. Sage Publications. http://www.sxf.uevora.pt/wp-content/uploads/2013/03/Charmaz_2006.pdf
- Charmaz, K.** (2014). *Constructing grounded theory*. Sage Publications. https://afshinsafaei.ir/wp-content/uploads/2022/10/Introducing-qualitative-methods-Charmaz-Kathy-Constructing-grounded-theory-2014-SAGE-Publications-libgen.li_.pdf
- Cong, C. W., Tan, S. A., Nainee, S., & Tan, C. S.** (2022). Psychometric qualities of the McMaster family assessment device-general functioning subscale for Malaysian samples.

- International Journal of Environmental Research and Public Health*, 19(4), 2440. <https://doi.org/10.3390/ijerph19042440>
- Corbin, J., & Strauss, A.** (2008). Basics of qualitative research. *Techniques and procedures for developing grounded theory* (3rd ed.). Sage Publications. <https://doi.org/10.4135/9781452230153>
- Djousse, L., Schubert, P., Ho, Y. L., Whitbourne, S. B., Cho, K., & Gaziano, J. M.** (2021). Leisure time physical activity, sedentary behavior, and risk of cardiovascular disease and mortality among US Veterans. *Journal of Novel Physiotherapy and Physical Rehabilitation*, 8(2), 33. <https://www.medsciencgroup.us/articles/JNPPR-8-191.php>
- Duvall, J., & Kaplan, R.** (2014). Enhancing the well-being of veterans using extended group-based nature recreation experiences. *The Journal of Rehabilitation Research and Development*, 51(5), 685–696. <https://doi.org/10.1682/JRRD.2013.08.0190>
- Elnitsky, C. A., Fisher, M. P., & Blevins, C. L.** (2017). Military service member and veteran reintegration: a conceptual analysis, unified definition, and key domains. *Frontiers in Psychology*, 8, 369. <https://doi.org/10.3389/fpsyg.2017.00369>
- Epstein, N. B., Baldwin, L. M., & Bishop, D. S.** (1983). The McMaster family assessment device. *Journal of Marital and Family Therapy*, 9(2), 171–180. <https://doi.org/10.1111/j.1752-0606.1983.tb01497.x>
- Fink, D. S., Stohl, M., Mannes, Z. L., Shmulewitz, D., Wall, M., Gutkind, S., Olfson, M., Gradus, M., Keyhani, S., Maynard, C., Keyes, K. M., Sherman, S., Martins, S., Saxon, A. J., & Hasin, D. S.** (2022). Comparing mental and physical health of US veterans by VA healthcare use: implications for generalizability of research in the VA electronic health records. *BMC Health Services Research*, 22(1), 1–11. <https://doi.org/10.1001/jamapsychiatry.2023.0019>
- Fischer, E. P., Sherman, M. D., McSweeney, J. C., Pyne, J. M., Owen, R. R., & Dixon, L. B.** (2015). Perspectives of family and veterans on family programs to support reintegration of returning veterans with post-traumatic stress disorder. *Psychological Services*, 12(3), 187. <https://doi.org/10.1037/ser0000033>
- Greer, M., & Vin-Raviv, N.** (2019). Outdoor-based therapeutic recreation programs among military veterans with post-traumatic stress disorder: Assessing the evidence. *Military Behavioral Health*, 7(3), 286–303. <https://doi.org/10.1080/21635781.2018.1543063>
- Gundlapalli, A. V., Redd, A. M., Suo, Y., Pettey, W. B., Brignone, E., Chin, D. L., Walker, L. E., Poltavskiy, E. A., Janak, J. C., Howard, J. T., Sosnov, J. A., & Steward, I. J.** (2020). Predicting and planning for musculoskeletal service-connected disabilities in VA using disability for active duty OEF/OIF military service members. *Military Medicine*, 185(Supplement_1), 413–419. <https://doi.org/10.1093/milmed/usz223>
- Hawkins, B. L., Townsend, J., & Heath, S. E.** (2018). The preliminary effects of a recreation-based military family camp on family functioning. *American Journal of Recreational Therapy*, 17(3), 15–24. <https://doi.org/10.5055/ajrt.2018.0164>
- Herrmann, T. S., Bettmann, J. E., Sweeney, C., Marchand, W. R., Carlson, J., & Hanley, A. W.** (2023). Military veterans' motivation and barriers to outdoor recreation participation. *Leisure Studies*, 42(4), 581–598. <https://doi.org/10.1080/02614367.2022.2125556>
- Hester, R. D.** (2017). Lack of access to mental health services contributing to the high suicide rates among veterans. *International Journal of Mental Health Systems*, 11(1), 47. DOI: <https://doi.org/10.1186/s13033-017-0154-2>
- Hicks, N. R., Sharaievska, I., Townsend, J., Tysor, D., & Miller, B.** (2024). Recreation-Based Programming for Veteran Families: Practitioners' Perspective. *Journal of Veterans Studies*, 10(1). <https://doi.org/10.21061/jvs.v10i1.556>
- Hulteen, R. M., Smith, J. J., Morgan, P. J., Barnett, L. M., Hallal, P. C., Colyvas, K., & Lubans, D. R.** (2017). Global participation in sport and leisure-time physical activities: A systematic review and meta-analysis. *Preventive Medicine*, 95, 14–25. <https://doi.org/10.1080/11745398.2016.1238308>
- Kalvesmaki, A. F., Penney, L. S., Shepherd-Banigan, M., Hernandez, B., Peacock, K., Parish, J., & Leykum, L. K.** (2024). Establishing a framework for youth caregiving research at the US Department of Veteran Affairs. *International Journal of Care and Caring*, 8(4), 756–764. <https://doi.org/10.1332/23978821Y2024D000000039>
- Kim, J., Lee, S., Chun, S., Han, A., & Heo, J.** (2017). The effects of leisure-time physical activity for optimism, life satisfaction, psychological well-being, and positive affect among older adults with loneliness. *Annals of Leisure Research*, 20(4), 406–415. <https://doi.org/10.1080/11745398.2016.1238308>
- Kuykendall, L., Boerman, L., & Zhu, Z.** (2018). The importance of leisure for subjective well-being. *Handbook of Well-being*, 1–14. https://doi.org/10.1007/978-3-319-69627-0_8-1
- Lackey, N. Q., Tysor, D. A., McNay, G. D., Joyner, L., Baker, K. H., & Hodge, C.** (2021). Mental health benefits of nature-based recreation: a systematic review. *Annals of Leisure Research*, 24(3), 379–393. <https://doi.org/10.1080/11745398.2019.1655459>
- Leykum, L. K., Penney, L. S., Dang, S., Trivedi, R. B., Noël, P. H., Pugh, J. A., Shepherd-Banigan, M. E., Pugh, M. J., Rupper, R., Finley, E., Parish-Johnson, J., Delgado, R., Peacock, K., Kalvesmaki, A., & Van Houtven, C. H.** (2022). Recommendations to improve health outcomes through recognizing and supporting caregivers. *Journal of General Internal Medicine*, 37(5), 1265–1269. <https://doi.org/10.1007/s11606-021-07247-w>
- Litwiller, F., White, C., Gallant, K. A., Gilbert, R., Hutchinson, S., Hamilton-Hinch, B., & Lauckner, H.** (2017). The benefits of recreation for the recovery and social inclusion of individuals with mental illness: An integrative review. *Leisure Sciences*, 39(1), 1–19. <https://doi.org/10.1080/01490400.2015.1120168>

- Lune, H., & Berg, B. L.** (2017). *Qualitative research methods for the social sciences*. Pearson.
- Melton, K., Townsend, J., & Hodge, C.** (2018). The creation of military family leisure experiences. *Journal of Family Theory & Review: Special Issue on Military-Veteran Connected Families – Advances in Theory and Methodology*, 10(3), 602–619. <https://doi.org/10.1111/jftr.12273>
- Owens, S.** (2022). Supporting the behavioral health needs of our nation's veterans. Substance Abuse and Mental Health Services Association. <https://www.samhsa.gov/blog/supporting-behavioral-health-needs-our-nations-veterans>
- Pedersen, S., & Revenson, T. A.** (2005). Parental illness, family functioning, and adolescent well-being: a family ecology framework to guide research. *Journal of Family Psychology*, 19(3), 404. <https://doi.org/10.1037/0893-3200.19.3.404>
- Petersen, H.** (2016). The success of recreation therapy for veterans. Veteran Health Administration. <https://www.va.gov/health/newsfeatures/2016/february/the-success-of-recreation-therapy-for-veterans.asp>
- Pugh, M. J., & Foundation for Advancing Veterans Health Research San Antonio, United States.** (2019). *The Epidemiology of Epilepsy and Traumatic Brain Injury: Severity, Mechanism, and Outcomes*. <https://apps.dtic.mil/sti/tr/pdf/AD1086265.pdf>
- Pugh, M. J., Jaramillo, C. A., Leung, K. W., Faverio, P., Fleming, N., Mortensen, E., Amuan, M. E., Wang, C., Eapen, B., Restrepo, M., & Morris, M. J.** (2016). Increasing prevalence of chronic lung disease in veterans of the wars in Iraq and Afghanistan. *Military Medicine*, 181(5), 476–481. <https://doi.org/10.7205/MILMED-D-15-00035>
- Pugh, M. J., Swan, A. A., Carlson, K. F., Jaramillo, C. A., Eapen, B. C., Dillahunst-Aspillaga, C., Amuan, M. E., Delgado, R. E., McConnell, K., Finley, E. P., Grafman, J. H., & Trajectories of Resilience and Complex Comorbidity Study Team.** (2018). Traumatic brain injury severity, comorbidity, social support, family functioning, and community reintegration among veterans of the Afghanistan and Iraq wars. *Archives of Physical Medicine and Rehabilitation*, 99(2), S40–S49. <https://doi.org/10.1016/j.apmr.2017.05.021>
- Riddick, C. C., & Russell, R. V.** (2014). *Research methods: How to conduct research in recreation, parks, sport and tourism* (3rd ed.). Sagamore.
- Romaniuk, M., Fisher, G., Kidd, C., & Batterham, P. J.** (2020). Assessing psychological adjustment and cultural reintegration after military service: development and psychometric evaluation of the post-separation military-civilian adjustment and reintegration measure (M-CARM). *BMC Psychiatry*, 20, 1–17. <https://doi.org/10.1186/s12888-020-02936-y>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Hiroki, I., Takeshi, N. Saori, Y., Tatsuro, I., Yasumichi, A. Kazunori, I., Kei, K., & Gondo, Y.** (2019). The impact of leisure activities on older adults' cognitive function, physical function, and mental health. *PloS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>
- Sayer, N. A., Carlson, K. F., & Frazier, P. A.** (2014). Reintegration challenges in US service members and veterans following combat deployment. *Social Issues and Policy Review*, 8(1), 33–73. <https://doi.org/10.1111/sipr.12001>
- Sprong, M. E., Hollender, H., Lee, Y. S., Rawlins Williams, L. A., Sneed, Z., Garakani, A., & Buono, F. D.** (2023). Disparities in program enrollment and employment outcomes for veterans with psychiatric and co-occurring substance use disorders referred or enrolled for VHA vocational rehabilitation. *Frontiers in Psychiatry*, 14, 1200450. <https://doi.org/10.3389/fpsy.2023.1200450>
- Strauss, A. L.** (1987). *Qualitative analysis for social scientists*. Cambridge University Press. <https://doi.org/10.1017/CBO9780511557842>
- Taylor, S., Miller, B. L., Tallapragada, M., & Vogel, M.** (2020). Veterans' transition out of the military and knowledge of mental health disorders. *Journal of Veterans Studies*, 6(1). <https://doi.org/10.21061/jvs.v6i1.131>
- Thomas, M. M., Harpaz-Rotem, I., Tsai, J., Southwick, S. M., & Pietrzak, R. H.** (2017). Mental and physical health conditions in US combat veterans: Results from the National Health and Resilience in Veterans Study. *The Primary Care Companion for CNS Disorders*, 19(3), 27474. <https://doi.org/10.4088/PCC.17m02118>
- Townsend, J., Hawkins, B. L., Bennett, J. L., Hoffman, J., Martin, T., Sotherden, E., & Bridges, W.** (2018). Preliminary long-term outcomes associated with recreation based health and wellness programs for injured service members. *Cogent Psychology*, 5(1), 1–17. <https://doi.org/10.1080/23311908.2018.1444330>
- Townsend, J., & Whaley, D.** (2024). Adaptive sports for military populations. In R. Hardin & J. Pate (Eds.) *Introduction to Paraspport and Recreation*. Champaign, IL: Human Kinetics.
- Ursano, R. J., Colpe, L. J., Heeringa, S. G., Kessler, R. C., Schoenbaum, M., Stein, M. B., & Army STARRS Collaborators.** (2014). The Army study to assess risk and resilience in servicemembers (Army STARRS). *Psychiatry: Interpersonal and Biological Processes*, 77(2), 107–119. <https://doi.org/10.1002/mpr.1401>
- US Census Bureau.** (2024). New report on US veterans and service-connected disabilities. <https://www.census.gov/newsroom/press-releases/2024/service-connected-disabilities.html>
- US Department of Veteran Affairs (VA).** (2023). Outreach, transition, and economic development. <https://www.benefits.va.gov/transition/tap.asp#>
- Vella, E. J., Milligan, B., & Bennett, J. L.** (2013). Participation in outdoor recreation program predicts improved psychosocial well-being among veterans with post-traumatic stress

disorder: A pilot study. *Military Medicine*, 178(2), 254–260.

<https://doi.org/10.7205/MILMED-D-12-00308>

Vogt, D., Perkins, D. F., Copeland, L. A., Finley, E. P., Jamieson, C. S., Booth, B., Lederer, S., & Gilman, C. L. (2018). The Veterans Metrics Initiative study of US veterans' experiences during their transition from military service. *BMJ Open*, 8(6), e020734. <https://doi.org/10.1136/bmjopen-2017-020734>

Wheeler, M., Cooper, N. R., Andrews, L., Hacker Hughes, J., Juanchich, M., Rakow, T., & Orbell, S. (2020). Outdoor recreational activity experiences improve psychological well-being of military veterans with post-traumatic stress disorder: Positive findings from a pilot study and a randomised controlled trial. *PLoS One*, 15(11), e0241763. <https://doi.org/10.1371/journal.pone.0241763>

TO CITE THIS ARTICLE:

Hicks, N. R., Sharaievska, I., Tsykalova, L., Townsend, J., & Miller, B. L. (2025). Veteran Perspectives on Family-Serving Recreation and Leisure Programs. *Journal of Veterans Studies*, 11(1), pp. 80–94. DOI: <https://doi.org/10.21061/jvs.v11i1.675>

Submitted: 14 January 2025 **Accepted:** 28 February 2025 **Published:** 24 March 2025

COPYRIGHT:

© 2025 The Author(s). This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC-BY 4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See <http://creativecommons.org/licenses/by/4.0/>.

Journal of Veterans Studies is a peer-reviewed open access journal published by VT Publishing.