

LITERATURE REVIEW: MILITARY AND VETERAN VOLUNTEERISM IN CANADA

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Contents

Executive Summary 4

Background and rationale 5

Methods 8

Results..... 13

 A description of included studies..... 13

 What has been reported in the literature about volunteerism among Veteran and military populations, particularly as related to the military-to-civilian transition?..... 15

 What comparisons can be made between Veteran/military populations and civilians related to the relationship of volunteerism and well-being? 17

 Why do Veterans volunteer?..... 17

 What are the preferences and patterns of Veteran and military volunteering activity? 17

 Who and what influences volunteering and volunteering policy at the federal, provincial, and municipal levels across Canada?..... 18

 Limitations 18

Conclusions and Recommendations 21

 Conclusions 21

 Recommendations 21

Appendix A..... 23

Appendix B 24

Appendix C 25

Appendix D..... 26

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Publications, presentations, and citations

A scoping review protocol for this study is registered and currently under review with *JB*
Evidence Synthesis.

(2024) Williams A, Godfrey C, Ross-White A, Sears K, Brinkschulte P, Perfetto K, Mahar AL. Volunteering among serving and ex-serving military members: A scoping review protocol. <https://doi.org/10.17605/OSF.IO/ACQ49>

(2024) Williams A, Godfrey C, Ross-White A, Sears K, Brinkschulte P, Perfetto K, Mahar AL. Volunteerism among serving and ex-serving military members: A scoping review protocol. *JB Evidence Synthesis*

Preliminary results of this literature review will be presented as a poster at the Global Evidence Summit in Prague in September, 2024. The Global Evidence Summit is a collaboration among Cochrane, JBI, Guidelines International Network, and the Campbell Collaboration: four leaders in the field of evidence-based policy and practice.

(2024) Godfrey CM, Sears K, Ross-White A, Perfetto K, Brinkschulte P, Patel V, Cheah S, Williams A & Mahar AL. The relationship between volunteerism and well-being in Veteran and military populations: A scoping review. *Global Evidence Summit: Using evidence. Improving lives*. Prague, Czech Republic. Sept 10-13

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Executive Summary

Background and rationale: Volunteering is associated with health and well-being benefits in civilian populations. Although a positive role of volunteerism has been documented following civilian retirement, less is known in military and Veteran populations and how volunteerism may facilitate the military-to-civilian transition. Engagement in volunteering may address feelings of isolation, disconnection from community, and create a sense of purpose. In addition, volunteering may provide military and Veteran populations an additional opportunity to serve or continue serving their community. There are no existing syntheses of the scientific literature on the topic of military and Veteran volunteering to guide charitable organizations, the defence sector, as well as those formally or informally supporting the military-to-civilian transition in their development of volunteer-based programs and services.

Objectives:

1. To examine the body of literature on volunteering among Canadian Armed Forces Veterans and military members.
2. To identify volunteering preferences, patterns, and key impacts on Veteran well-being, particularly to improve the military-to-civilian transition.

Findings: We identified fourteen peer-reviewed, scientific studies to answer the five study research questions. All studies focused on Veterans rather than still serving military personnel and thirteen on United States military. Most studies focused on Veterans engaged in volunteering and evaluated specific Veteran-focused volunteer programs; several compared volunteer activities between Veterans and non-Veterans and four investigated factors associated with volunteering among Veterans. Overall, Veteran volunteers reported benefits to participating in the volunteer-based programs, including to their mental health, overall health, feelings of social isolation, and loneliness, as well as to their families. None of the studies reported harms associated with volunteering, although one reported stress associated with participation. Veteran volunteers reported a sense of purpose and ability to continue serving their communities after service. Veteran engagement in volunteering varied by sociodemographic, employment, and military-specific factors and was often at a higher rate than civilians.

Implications for research and policy: No Canadian evidence on volunteering among Canadian Armed Forces Veterans and military members exists to guide local, provincial/territorial, or national volunteer programming and services. None of the studies asked Veterans about their volunteer preferences, asked them generally about the perceived benefits of volunteering, and none spoke with Veterans to understand why they did or did not volunteer. None focused specifically on the role of volunteering in the military-to-civilian transition period. However, more Veterans than civilians report volunteering. Given differences in why Veterans volunteer, using only research conducted with civilians to make policy and program decisions may not be optimal. Given differences in defence, health, and social structures between the United States and Canada, relying only on US-based evidence may not create optimal volunteering conditions for Canadian Veterans.

Recommended next steps: High quality research in the Canadian context, including a needs assessment among Canadian Veterans as well as the leveraging of existing, large national data are recommended to better understand the preferences, practices, and patterns of Veterans in Canada. Organizations offering Veterans volunteer-based opportunities to address health and well-being should be based on strong evidence and consider building structures for program evaluation to optimize benefits and prevent harms. These organizations may also consider how volunteering may be promoted among military and Veterans in the military-to-civilian transition. In addition, engagement with key relevant parties to understand the political landscape of support for volunteerism among Veterans could be beneficial. [OB]

Background and rationale

Military service is a unique career path that begins with basic training where new recruits are trained to operate within the military setting. During service, military members are provided with many necessities of life, such as housing and health services, that civilians must secure on their own¹. Additionally, the military has its own culture of dress, language, social norms, and expectations that is distinct from larger national cultures in which military institutions are situated². After spending one's career in this unique setting, returning to the civilian world can be a jarring experience and has been described by American scholars as a "culture shock"¹. In broad terms, the military-to-civilian transition (MCT) is the process of leaving military service

and entering the civilian world - it is a monumental event in military members' life course. The lived experience of MCT is unique to each military member/Veteran and has important implications for the health and well-being of Veterans and their families ^{3,4}. Research from the Five-Eyes countries (i.e., Canada, United States, United Kingdom, Australia, and New Zealand) shows high proportions of Veterans reporting difficulty with the transition to civilian life ranging from 39% to 78% ⁵⁻⁹. Furthermore, the proportion of Veterans reporting difficulty with transition is increasing in Canada ⁵ and the United States ⁷.

During MCT Veterans report concerns about their well-being including loss of identity and or purpose ¹⁰ as well as an experience of social isolation ¹¹. It has been demonstrated ¹² that both social isolation and loneliness have negative health implications such as a tendency toward high blood pressure, depression, frailty, and cognitive impairment. Furthermore, Veterans experience post-traumatic stress disorder (PTSD) and other chronic conditions in greater proportions than the general population ^{5,7,13}. Notably, social isolation and depression are prominent symptoms of PTSD ¹⁴ and hence may exacerbate the experiences associated with MCT for Veterans living with these conditions.

Volunteering may be an approach to address identity loss, social isolation, and mental health concerns experienced by Veterans during re-integration into civilian life. Ellis and Noyes (15) defined volunteering as “choosing to act in recognition of a need, with an attitude of social responsibility and without concern for monetary profit, going beyond one’s basic obligations” (as cited in [Suk Ching Liu et al., 2017, p. 531](#)). Volunteering, when intrinsically motivated, can be driven by a desire to help one’s own or other communities, or an individual ¹⁶. Similarly, military service is often motivated by a desire to serve one’s country and contribute to the larger society in some way. Given the similarity in value of service associated with both volunteering and military service, it stands to reason that volunteering may be attractive to Veterans.

Volunteering has also been associated with numerous health and social benefits for the volunteer ¹⁷. Interestingly, Utz, Carr (18) reported that volunteering can help people overcome major life events such as retirement from a career. In addition, many of the benefits noted in the literature are particularly relevant for Veterans in transition, including improved psychological health and social connection ¹⁷. The psychological benefits of volunteering noted in the literature include “maintenance of self-identity” ¹⁷, suggesting that volunteering could potentially mitigate

challenges with identity loss at the close of a military career. Volunteering could be particularly valuable to Veterans who experience health conditions resulting in difficulties with activities of daily living (e.g., bathing, mobility, employment activities, caring for dependents, etc.) that are also associated with identity loss ¹⁹. In addition to addressing identity loss, volunteering provides an opportunity to connect with individuals and communities. Social connectedness and a sense of belonging are also associated with volunteering ¹⁷ and are known to improve adjustment to MCT. Finally, among older adults, volunteering is associated with reduced mortality and decreased rates of depression over time ¹⁷, highlighting the potential long-term benefits for Veterans over their life course.

The literature on MCT, though sparse, suggests the utility of volunteering as a means of improving adjustment to civilian life. Findings from Canadian studies indicate that volunteering may be a useful means of coping with the stress of MCT, establishing new and meaningful activities, and creating structure in routines after release ²⁰⁻²². However, a preliminary search of MEDLINE (PubMed), CINAHL (EBSCO), the Cochrane Database of Systematic Reviews, and JBI Evidence Synthesis revealed no ongoing or published reviews on the impact of volunteering on military members/Veterans experiencing MCT. Therefore, the breadth and depth of the literature on volunteering as it relates to MCT is unknown.

Therefore, the objectives of this project were to

1. To examine the body of literature on volunteering among Canadian Armed Forces Veterans and military members.
2. To identify volunteering preferences, patterns, and key impacts on Veteran well-being, particularly to improve the military-to- civilian transition.

Methods

Review question(s)

Our primary, overarching research question was: What has been reported in the literature about volunteerism among Veteran and military populations, particularly as related to the military-to-civilian transition?

To further focus the scoping review, we addressed the following sub-questions:

1. Does volunteering have a positive/negative/neutral impact on well-being among Veteran and military populations?
 - a. Is the impact of volunteering on well-being different by sex or gender? Age at military-to-civilian transition? Employment status? Family structure?
2. What comparisons can be made between Veteran/military populations and civilians related to the relationship of volunteerism and well-being?
3. What are the sociodemographic (individual and family), military-related, and other determinants of volunteering?
4. What are the preferences and patterns of Veteran and military volunteering activity?
 - a. Group versus individual settings?
 - b. Veteran/military settings versus civilian settings?
 - c. Are there any variations by age, gender, career level, and religion?
5. Who and what influences volunteering and volunteering policy at the federal, provincial, and municipal levels across Canada?

Inclusion criteria

Participants

This review considered studies that included military members and Veterans. We included studies that examined Veterans or military personnel of all ages; in any stage of service including

in-service, transition to civilian life, and post-service; any service type (e.g., Regular and Reserve Force CAF members). Studies exclusively examining civilians were excluded.

Concept

This review considered the concept of volunteerism and its relationship to well-being. There is no commonly accepted definition of volunteering or volunteerism in the literature²³. Three key elements of volunteering appear consistently throughout the literature: the volunteer activity involves no monetary compensation, is non-obligatory and non-coerced, and aids an individual, or group.

Well-being, as defined by the World Health Organization, is “a positive state experienced by individuals and societies. Like health, well-being is a resource for daily life and is determined by social, economic and environmental conditions. Well-being encompasses quality of life, as well as the ability of people and societies to contribute to the world in accordance with a sense of meaning and purpose”²⁴. Similarly, Veterans Affairs Canada conceptualizes well-being as a complex concept that encompasses many inter-related factors; one of which is engagement in meaningful activity, which can include volunteering. In this sense, volunteering can influence (and be influenced by) other elements of well-being such as health, social integration, and environment (e.g., social/cultural, political, physical, etc.). Importantly, the intersectional lens is missing from Veterans Affairs Canada’s well-being concept and identity factors such as sex and gender, sexual orientation, religion, race and ethnicity, and many others are likely to influence volunteering motivation, preferences, and patterns. For Veterans, service-related factors like rank, service element, trade, etc. may also play a role.

While we were interested in the relationship between well-being and volunteering, we did not include the concept of well-being as part of the inclusion/exclusion criteria when screening and selecting articles to avoid excluding relevant papers. Instead, we used volunteering as the primary concept on which papers were included/excluded and examined well-being at the data extraction and synthesis stage.

Context

This review considered studies that examined volunteering within a civilian or military context, with particular attention to the transition from military to civilian life.

Types of sources

This scoping review considered peer-reviewed quantitative, qualitative, and mixed methods studies of any design as well as systematic reviews for inclusion. Master's and doctoral dissertations, opinion papers (e.g., editorials, discussion papers), and conference abstracts without an associated peer-reviewed manuscript were excluded.

Methods

The scoping review was conducted in accordance with the JBI methodology for scoping reviews²⁵ and in line with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR)²⁶.

Search strategy

The search strategy aimed to locate both published and unpublished primary studies and reviews. An initial limited search of MEDLINE (PubMed) and CINAHL (EBSCO) was undertaken to identify articles on the topic. The text words contained in the titles and abstracts of relevant articles, and the index terms used to describe the articles, were used to develop a full search strategy for MEDLINE (PubMed) and CINAHL (EBSCO) (see Appendix A). The search strategy, including all identified keywords and index terms, was adapted for each information source. The reference lists of articles selected for full text review were screened for additional papers.

Articles published in English or French were included. Articles published from 2000 to the present were included to ensure information sources were based in current military and release processes and represent contemporary experiences. Searched databases included MEDLINE (PubMed), CINAHL (EBSCO), Embase (EBSCO), and APA PsycInfo (Ovid). Sources of unpublished studies and gray literature included Google and Google Scholar as well as the following military/Veteran-serving government agencies and organizations: The RAND Corporation, Canadian Institute for Military and Veteran Health Research (CIMVHR), Institute for Veterans and Military Families (IVMF), The Purdue Military Research Institute (PMRI), Office for Military Families and Veterans at University of Alabama, Center for Innovation and Research on Veterans and Military Families, King's Centre for Military Health Research, Veterans and Families Institute for Military Social Research, Forces in Mind Trust,

University of New South Wales Defense Research Institute, Australian Families of the Military Research and Support Foundation, Military and Emergency Services Health Australia, University of Otago Veterans' Health Research, and other relevant research institutes that are discovered during the search and selection phase.

Study/Source of evidence selection

Following the search, all identified records were collated and uploaded into Covidence (Veritas Health Innovation, 2021) and duplicates removed. Following a pilot test, titles and abstracts were screened by 2 independent reviewers for assessment against the inclusion criteria for the review. Potentially relevant papers were retrieved. The full text of selected citations was assessed in detail against the inclusion criteria by 2 independent reviewers. Reasons for exclusion of full-text papers that did not meet the inclusion criteria were recorded and reported. Any disagreements between the reviewers at each stage were resolved through discussion with a third reviewer. The results of the search are presented in a PRISMA flow diagram ²⁷.

Data extraction

Data were extracted using a data extraction tool developed by the team. The data extracted included specific details about the military members/Veterans included (e.g., service-related information such as service element); volunteering, well-being, the relationship between them; career stage of the participants (in service, in transition, post-service), and type of article (e.g., primary study or opinion piece) including methodology.

Data analysis and presentation

The evidence is organized according to the review objective and question(s). The data are presented graphically or in diagrammatic or tabular form. A narrative summary accompanies the tabulated results and describes how the results relate to the reviews objective and question/s. Descriptive statistics and counts will be used to report study characteristics such as type of study, military service details, family structure, domains of well-being, types of volunteer activities, and factors contributing to outcomes and experiences.

Consultation with Veterans

In addition to reviewing the literature, consultations with three Veterans (male, one retired and two employed, two Canadian Armed Forces, one United Kingdom Armed Forces) involved in volunteering were conducted. This included multiple one on one meetings, as well as written correspondence which included reflection and response to volunteering-related questions and collecting responses to summaries of the scoping review findings and recommendations.

Consultation with these three Veterans continues to determine the most appropriate way to add their contributions in the literature, including formal acknowledgement of ideas, recommendations, and suggested next steps in the military-to-civilian transition and volunteering. Certainly, these conversations and formal feedback were conceptually integrated into the interpretation of the findings as well as the recommendations. Direct quotes were not requested or provided.

Results

A description of included studies

A total of fourteen peer-reviewed, scientific studies were included that could help answer questions related to volunteering among Veterans and military populations. We identified 13 peer-reviewed articles from more than 3000 potential citations (Figure 1). An additional study was identified through the grey literature search (see Appendix B). Studies were published between 2007 and 2024; twelve were published in 2017 or later. None of the studies included Canadian populations. Thirteen were completed in the United States (US) and one in the United Kingdom (UK). Four studies were qualitative, two were both quantitative and qualitative, and the remainder were quantitative. Study data were collected between 2005 and 2023 through interviews, pre-post program or service delivery evaluations, surveys, and questionnaires. The number of participants in the studies ranged from 1 to 114,816. The number of Veterans who were included ranged from 1 to 3,690. The median number of Veteran volunteers in a single study was 340. If we removed duplicates representing multiple studies conducted on the same dataset, the median number was 135.

Three studies focused on disaster relief volunteering, six generally on volunteering without a description of the volunteering activities, one focused on volunteering in clinical trials, one on a peer support program, and one on an English language coaching program. Goals ranged from understanding the mental health benefits of volunteering for Veterans, evaluating the benefits and feasibility of individual volunteering programs, to understanding participation rates of Veterans and their motivations relative to civilians.

All studies focused on Veterans, those who previously served in the military; one was unclear whether it also included currently serving military members. Who was considered a Veteran was not consistent across the studies. Definitions of Veteran status ranged from requiring two years of service in the US military post Sept 11, 2001, with an honourable or medical discharge to be broadly defined as US military Veteran; one study defined a Veteran as having previous regular service in the UK Armed Forces. The Veteran participants across studies were predominantly male, with female populations ranging from 0-42%. Veterans in the studies were young with majority of participants under 40 years old. Most participants were White, ranging from 56% to

87% of the participant population. Approximately half of the populations were married. In two studies (one program) almost 60% of the participants were unemployed. Regarding the mental health of the participants, one evaluated program was specifically delivered for Veterans with a diagnosis of depression, anxiety, or PTSD. Two studies evaluated a program where none of the participants reported previous mental health treatment ever. One study reported on a single Veteran with PTSD’s experience with volunteering and in another study, 43% of participants were seeking mental health treatment, of which, 50% screened positive for PTSD and 23% screened positive for depression. The remaining studies did not describe the mental health of their study participants. Two studies did not describe the mental health status of their research participants.

Nine studies focused on Veterans who volunteered in some capacity with Veteran-specific organizations, programs, or services; these studies evaluated participation in four volunteering programs (Table 1). Four studies centered on “The Mission Continues Fellowship program”, a civic service program combining leadership training, a stipend and community volunteerism. Three studies focused on “Team Rubicon”, a volunteer-led and US-based disaster relief organization. One study evaluated the “Caring Letters Suicide Prevention Program”, delivered by Veterans to hospitalized Veterans in the Veterans Affairs health system. Another study evaluated participation in an English language coaching program, delivered by Veterans to English-language learners in the United States.

Table 1: A description of Veteran-specific volunteering programs evaluated

The Program	Citations
Team Rubicon: a nonprofit social service organization formed in 2010 with a mission to provide disaster relief for natural disasters by uniting the skills and experiences of military Veterans and first responders	28-30
The Mission Continues: a 6-month competitive program for Veterans that includes volunteering in their community for 20 hours per week plus a stipend and leadership training.	31-34
Caring Letters Suicide Prevention Program, matching peer veterans with psychiatric inpatient Veterans and providing simple, brief caring letters anonymously. Included workshops re: writing letters, sending one letter per month for 6 months.	35
V-SPEAK- Veteran Service Promoting English Acquisition and Knowledge, matching a Veteran with a mental health concern with an English language learner to deliver a volunteer-based structured language program that included an orientation session, and 8 weeks of language lessons.	36

One study compared reasons for participating in clinical trials between US military Veterans and non-Veterans residing in New Mexico and seeking healthcare in Veterans Affairs health centres. Three studies compared volunteering participation between US military Veterans and non-Veterans using national survey data in the United States; two of these used data from the Current Population Survey Volunteering Supplement conducted by the US Census Bureau. One of these focused on people enrolled at secondary education institutions. One study investigated volunteering participation among UK military Veterans during the COVID-19 pandemic, engaging Veterans already participating in a prospective cohort study through the Kings Centre for Military and Veteran Health Research.

What has been reported in the literature about volunteerism among Veteran and military populations, particularly as related to the military-to-civilian transition?

Appendix C organizes which studies addressed the *a priori* research contract study questions. Appendix D organizes the studies according to Veterans Affairs Canada domains of well-being. Nine studies reported the benefits of volunteering on well-being for Veterans^{28-32, 34-37}. Seven studies investigated associations between volunteering and mental health, three focused on loneliness or isolation, and two each focused on overall health, and social support, and one each focused on physical health, and family benefits.

Mental health: Three studies evaluating three volunteer programs for Veterans documented a mental health benefit for participants^{28, 31, 36}, and one study found no benefit associated with participation in the program for volunteers³⁵. An additional study documented that 33% of Veterans reported participating in the program was stressful³⁴. Two studies reported a reduction in mental health stigma among Veteran volunteers in two volunteering programs^{30, 35}. One study reported that the odds of engaging with campus mental health services was higher for those who volunteered, and this association was consistent for Veterans and non-Veteran students³⁷. Among volunteers in one Veteran-specific program, 89% reported that participation made them feel a little better about themselves or their life situation³⁶.

Loneliness and isolation: One study observed that Veterans volunteering in a Veteran-specific volunteer program reported decreased scores on loneliness and social isolation after participation

³¹, and another study documented 81% of Veterans with a mental health diagnosis would be more likely to be socially active or volunteer again in the future, after volunteering with their program ³⁶. Another study documented that 84% were likely to stay involved with volunteering or public service after the program ³⁴.

Overall and physical health: Participants in one Veteran-specific volunteering program documented an increase in perceived overall health following participation in a volunteer program ³¹.

Social support: A study evaluating a volunteer disaster relief organization noted that post disaster social support from fellow volunteers was a benefit-related theme ²⁹. Another study documented increased feelings of social support following engagement with their Veteran-specific volunteering-based program ³¹.

Family: One study investigated the perceived benefits of volunteering for a Veteran's family, as reported by the Veteran volunteer ³². Overall, most Veterans who participated in the program believed they had set an example for their family and children, agreed that volunteering increased their families' awareness of social and community issues, and that volunteering brought resources and information and skills back to their family. Almost half agreed that their involvement in the program led to their family members getting involved in volunteering.

Employment: One study evaluating a volunteering based program that also included a stipend and leadership training reported that 94% of participants agreed that the program improved their chances of finding a job, 93% reported it improved their performance on the job, 83% reported it helped them make a career change and qualitative reported that they had developed new skills ³⁴. Others in the same program felt participation did not help their careers ³⁴. Another study reported that participation in the same program had a financial benefit for their family ³².

Is the impact of volunteering on well-being different by sex or gender? Age at military-to-civilian transition? Employment status? Family structure?

None of the included studies investigated whether the benefits of volunteering differed according to different characteristics of the Veteran, like sex, gender, age, employment status or family structure.

What comparisons can be made between Veteran/military populations and civilians related to the relationship of volunteerism and well-being?

One study investigated whether the association between engagement and volunteering was consistent for Veterans and non-Veterans. Albright et al. (2017) documented a lower odds of reporting recent depression among student volunteers and that the relationship was similar for Veterans and non-Veteran students³⁷. They also documented volunteers had a higher odds of meeting weekly recommendations for physical activity and determined that this association was the same in Veterans and non-Veteran volunteers³⁷.

Why do Veterans volunteer?

Five studies provided information on the reasons Veterans volunteered^{28-30, 33, 38}; four reported on two Veteran-specific volunteering programs and one compared reasons for participating in clinical trials between Veterans and non-Veterans³⁸. Among Veterans volunteering with Veteran-specific programs, wanting to continue service to their country, a sense of value and purpose, and the ability to help others were commonly reported^{28-30, 33, 34}. In one study, 41% of Veterans thought that volunteering would ease their transition to civilian life and 20% thought it would help them integrate and take part in their community³³. Veterans ranked their reasons for wanting to participate in clinical trials differently from non-Veterans. The top three reasons Veterans wanted to participate were to pay back those who had treated them, helping society generally, and seeking improvements in their own health³⁸. Veterans in another study reported that participation in the volunteering-based program felt it helped their personal fulfillment and ability to achieve personal goals³⁴.

What are the preferences and patterns of Veteran and military volunteering activity?

None of the studies assessed Veteran and military preferences for volunteering activity. Across studies, 30-40% of Veterans reported engaging in formal volunteering activity^{37, 39, 40} and 10% had participated in a clinical trial³⁸. Three studies reported that the odds of volunteering were higher among Veterans than non-Veterans^{37, 40, 41}. Engagement in volunteering among Veterans varied according to race/ethnicity, family and living arrangements, age, employment status, previous military rank, and education. Two of the four studies contributing these results were

looking to see if the characteristics of those who engaged in volunteering differed between Veterans and non-Veterans: these studies concluded that the characteristics of volunteers did differ in some cases between Veterans and non-Veterans but not in another; however, the specific details were not presented in a useable format^{37, 40, 41}. Among a study of US Veterans, the odds of volunteering were associated with employment sector, sex, education, living arrangements and household structure⁴⁰. Among the study of UK Veterans, those that reported engagement in formal volunteer activities were 65 years of age and older, retired, commissioned officers, and no longer in a relationship. Those that did not report engagement in formal volunteer activities reported lower formal education.³⁹

One study investigated whether Veterans who screened positive for a common mental disorder, PTSD, loneliness, or hazardous alcohol consumption, had different engagement in volunteering activities³⁹. They concluded that mental health, loneliness and alcohol consumption were not associated with the odds of participating in formal volunteering activities. They also found that reporting good or excellent health overall was associated with higher odds of formally volunteering compared to those with lower self-reported health status³⁹.

Who and what influences volunteering and volunteering policy at the federal, provincial, and municipal levels across Canada?

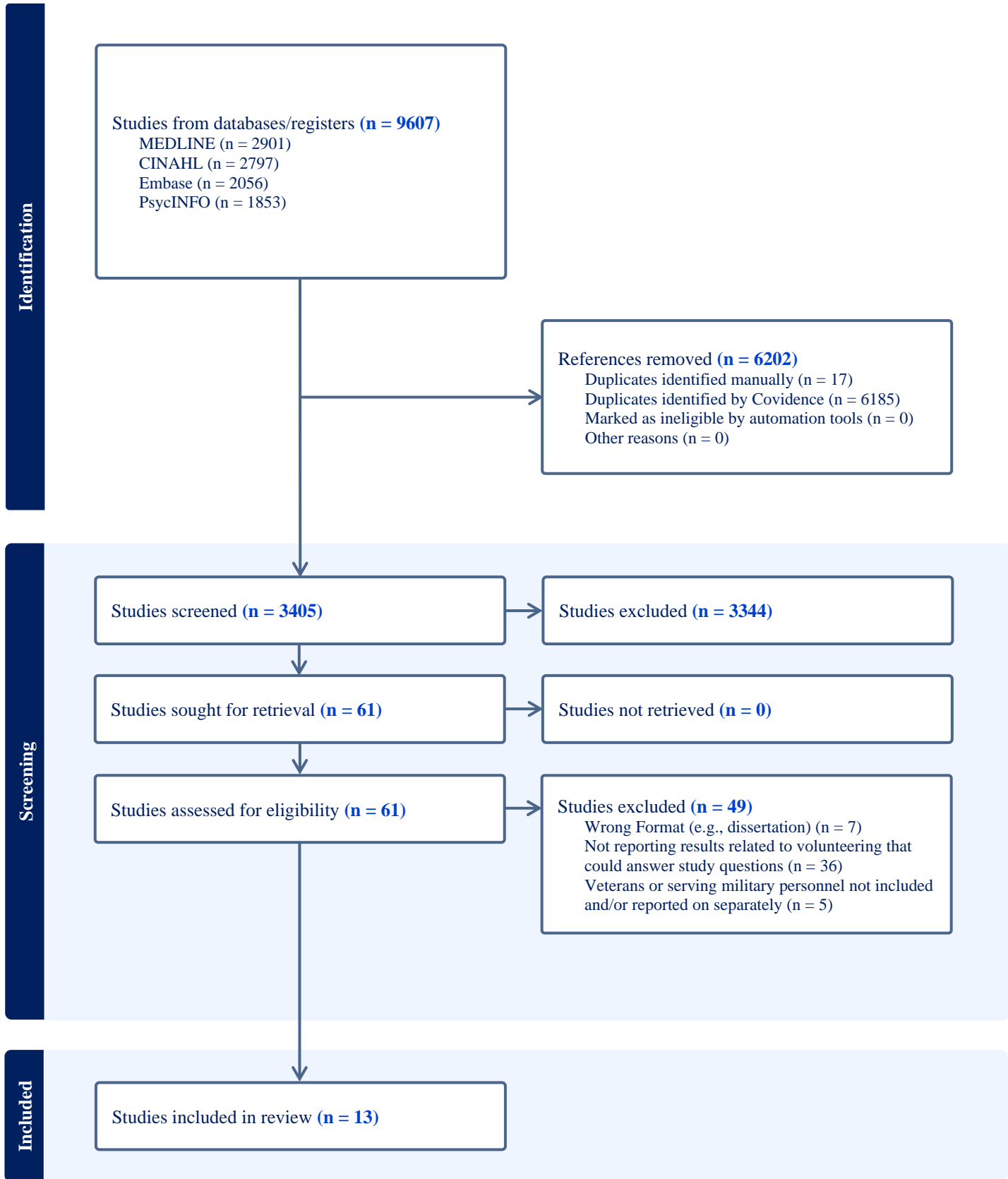
None of the identified studies or resources addressed this research question. Future efforts to address this question could engage key relevant parties within leading charitable organizations across the country, as well as with Canadian Veteran advocacy groups involved in influencing volunteering policy.

Limitations

All the studies were conducted outside of Canada where defence, health, and social systems for Veterans vary significantly. Most studies were completed by two groups of researchers and focused on specific programs which may not be relevant to the Canadian context. In addition, they evaluated very specific types of volunteer opportunities, meaning the findings may not be useful when considering other volunteer activities. The quality of all included studies was not high and there was significant variability in the reporting of results, particularly those using large survey data making the correct interpretation of the findings difficult. Organizations that provide

Veterans with an opportunity to engage in Veteran-specific volunteer-based programming, such as through disaster response or within community organizations, cannot separate out the benefits of volunteering itself from the broader package of the program they are providing. A few dissertations focused on volunteering had been published recently without corresponding publications in the peer-reviewed literature. Their findings may be useful to update this synthesis in the future.

Figure 1: Peer review literature search results



Conclusions and Recommendations

Conclusions

There appears to be increasing focus on the topic of Veterans and volunteering in the US. There are currently no studies of Veterans and volunteerism in the Canadian context. Although none of the studies specifically focused on the military-to-civilian transition, organizations that deliver a structured opportunity for Veterans to volunteer during this time may have a positive impact on well-being. Volunteer opportunities may provide Veterans with a sense of belonging and purpose, reduce mental health symptoms, decrease loneliness and isolation, and re-connect Veterans with their community, while providing them the opportunity for civic engagement with a positive impact separate from their previous military career. None of the included studies reported harms stemming from engagement in volunteering, rather quite a number demonstrated benefits. A gap exists in the understanding of volunteering impacts among Veterans outside the US, Veteran preferences and patterns of volunteering, and reasons why Veterans volunteer in the Canadian context. Generating this information could provide a baseline from which to engage Veterans in volunteering in Canada as a means of supporting the military-to-civilian transition, and thereby applying skills developed and learned in the military as well as personal passions and values, in particular for those who may not be interested in developing a second, paid career.

Recommendations

1. Canadian charitable organizations that deliver programs to Veterans and their families with the goals of improving the military-to-civilian transition, including those doing so through volunteerism, should formally incorporate program evaluation. Program evaluation should consider age, sex, gender, sexual orientation, employment status, family structure, race/ethnicity, geography, and other identities to identify groups who may benefit the most from programming, while also identifying those for whom there may be little or no benefit.
2. Scientific studies of the benefits of volunteering programs are needed where there is an opportunity for harm to the volunteering Veteran or where a volunteer program is being used as a modality to treat specific health conditions either in addition to, or in replacement of, medical approaches. Where possible, research into the benefits of volunteering should separately report the benefit by age, sex, gender, sexual orientation, employment status, family structure, race/ethnicity, geography, and other identities to identify groups who may

benefit the most from programming, while also identifying those for whom there may be little or no benefit.

3. Organizations considering the development of programs or services for Canadian Veterans and their families that include volunteerism should consider first completing a needs assessment to understand Veteran volunteer preferences, including the types of volunteering opportunities that align with their goals and values. This could be done at the organizational level, with each organization tailoring their needs assessment to their mission and values. Alternatively, a national needs assessment of volunteering among Canadian Veterans could answer broader questions about preferences for volunteering among the wider population.
4. Research into volunteerism, its benefits and determinants among Canadian Veterans and Canadian Armed Forces members are needed to provide an evidence-base to inform policy and programming directed at volunteering during the military-to-civilian transition. Prospective research could be conducted through the addition of questions about volunteering onto the Veterans Affairs Canada Life After Service Study or the initiation of research among Canadian Veteran populations using surveys, focus groups or interviews. These studies could ask targeted, detailed questions that would benefit organizations delivering services currently and those in the future, as well as Veterans and their families. Existing national data sources housed at Statistics Canada in the Social Data Linkage Environment also offer opportunities to better understand volunteering among Canadian Veterans, their families, and Canadian Armed Forces members. For example, questions capturing both Veterans status and volunteering are available on the 2021 version of the Canadian Community Health Survey 2021 version and the 2021 version of the Canadian Housing Survey. Other existing datasets may also include this information. In addition, questions capturing Veterans status and volunteering are also available in the Canadian Longitudinal Study of Aging.
5. To better understand the political landscape of support for volunteerism among Veterans, future efforts should engage key relevant parties within leading charitable organizations across the country, as well as with Canadian Veteran advocacy groups involved in influencing volunteering policy.

Appendix A

Search strategy

Embase Classic+Embase (Pubmed)

Search conducted on February 8, 2024.

- 1 veteran/ or (veteran* or ex-military* or ex-serving).mp. 67662
- 2 exp military personnel/ 6442
- 3 exp volunteer/ or voluntary worker/ 72322
- 4 volunt*.mp. 436351
- 5 (1 or 2) and (3 or 4) 1029

MEDLINE(R) (Ovid)

Search conducted on February 8, 2024.

- 1 Veterans/ or (veteran* or ex-military* or ex-serving).ab,ti. 49007
- 2 Military Personnel/ 45307
- 3 volunteers/ or hospital volunteers/ 12262
- 4 volunt*.ab,ti. 300878
- 5 (1 or 2) and (3 or 4) 1442

APA PsychInfo (Ovid)

Search conducted on February 8, 2024.

- 1 military veterans/ or (veteran* or ex-military* or ex-serving).ab,ti. 27921
- 2 exp military personnel/ 36045
- 3 volunteers/ or volunteer military personnel/ 6232
- 4 volunt*.ab,ti. 79557
- 5 (1 or 2) and (3 or 4) 921

CINAHL (EBSCO)

Search conducted on February 14, 2024.

#	Query	Results
S1	(MH "Veterans+")	19,748
S2	TX (veteran* or ex-military* or ex-serving)	95,221
S3	(MH "Military Personnel+")	18,498
S4	(MH "Volunteer Workers")	14,726
S5	(MH "Volunteer Experiences")	1,988
S6	AB volunt* OR TI volunt*	75,433
S7	S4 OR S5 OR S6	83,874
S8	S1 OR S2 OR S3	110,561
S9	S7 AND S8	1,424

Appendix B

Grey Literature Search

We completed multiple Internet searches through Google and Google Scholar using the following search strategy, identifying the following number of results:

Canada-based search (updated August 2, 2024)

#	Query	Results
1	veterans volunteering	98,600
2	military veterans volunteering	56,300
3	military veterans volunteering local communities	34,400
4	mental health military veterans volunteering local communities	27,700
5	"mental health" "military veterans volunteering" local communities	2

United Kingdom-based search (conducted July 4, 2024)

#	Query	Results
1	veterans volunteering	99,300
2	military veterans volunteering	55,900
3	military veterans volunteering local communities	34,400
4	mental health military veterans volunteering local communities	27,700
5	"mental health" "military veterans volunteering" local communities	2

Primarily, the searches identified governmental and nonprofit organizations that were either recruiting civilian volunteers to support Veteran-centered programming or services or recruiting Veteran volunteers for both Veteran-specific and non-Veteran specific volunteering opportunities. Examples of these organizations include Team Rubicon Canada, Perley Health, Soldiers Helping Soldiers, True Patriot Love Foundation, and Guardian Grange.

Appendix C

Table 2: Organization of studies that report on Veterans and volunteering according to the a priori research question

Research Question	Citations
What has been reported in the literature about volunteerism among Veteran and military populations, particularly as related to the military-to-civilian transition?	28-41
Sub Questions	Citations
Does volunteering have a positive/negative/neutral impact on well-being among Veteran and military populations?	28, 31, 32, 34-37
Is the impact of volunteering on well-being different by sex or gender? Age at military-to-civilian transition? Employment status? Family structure?	37
What comparisons can be made between Veteran/military populations and civilians related to the relationship of volunteerism and well-being?	37
What are the sociodemographic (individual and family), military-related, and other determinants of volunteering?	28-30, 33, 34, 38
What are the preferences and patterns of Veteran and military volunteering activity?	37-41
Do preferences and patterns for Group versus individual settings? Veteran/military settings versus civilian settings?	None
Do preferences or patterns vary by age, gender, career level, and religion?	37, 39-41
Who and what influences volunteering and volunteering policy at the federal, provincial, and municipal levels across Canada?	None

Appendix D

Table 3: Organization of studies and their outcomes relative to Veterans Affairs Canada's Domains of Well-being

	Health	Purpose	Finances	Social Integration	Life skills	Housing and physical environment	Culture and social environment
Benefits	28, 31, 35-37	34	31, 32, 34	31, 34, 36	29-34, 36		29, 31, 32
Determinants		28-30, 38		33			
Patterns	39		40			37, 40	37, 39-41

References

1. Keeling M. Stories of transition: US Veterans' narratives of transition to civilian life and the important role of identity. *Journal of Military, Veteran and Family Health*. 2018;4(2):28-36.
2. Reger MA, Etherage JR, Reger GM, Gahm GA. Civilian psychologists in an army culture: The ethical challenge of cultural competence. *Military Psychology*. 2008;20(1):21-35.
3. Thompson J, Lockhart W. Backgrounder for the Road to Civilian Life (R2CL) Program of Research. In: Canada VA, editor. Charlottetown, PE, CA2015.
4. Pedlar D, Thompson J, Castro C. Military-to-civilian transition theories and frameworks. In: Castro C, Dursun S, editors. *Military Veteran reintegration: Approach, management, and assessment of military Veterans transitioning to civilian life*. London, United Kingdom: Academic Press; 2019. p. 21-50.
5. Sweet J, Poirier A, Pound T, VanTil L. Well-being of Canadian Regular Force Veterans, Findings from LASS 2019 Survey, Research Directorate Technical Report. In: Canada VA, editor. Charlottetown, PEI, CA: Government of Canada; 2020.
6. Federation. RAFF. New research reveals Armed Forces veterans take an average of seven months to transition to civilian careers Peterborough, UK: Royal Air Force Families Federation.; 2019 [Available from: <https://www.raf-ff.org.uk/new-research-reveals-armed-forces-veterans-take-an-average-of-seven-months-to-transition-to-civilian-careers/>].
7. Kintzle S, Rasheed J, Castro C. The state of the American Veteran: The Chicagoland Veterans study. Los Angeles, CA, USA: Centre for Innovation and Research on Veterans & Military Families; 2016.
8. Cardow A, Imbeau J-S, Apiata BW, V. C., Martin J. Leave no one behind? Transitioning from the military to civilian life in New Zealand. *Journal of Management & Organization*. 2024;30:369-85.
9. Romaniuk M, Fisher G, Kidd C, Batterham PJ. 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*. 2020;20(1):531.
10. Lee J, Dursun S, Skomorovsky A, Thompson J. Correlates of perceived military to civilian transition challenges among Canadian Armed Forces Veterans. *Journal of Military, Veteran and Family Health*. 2020;6(2):26-39.
11. Hatch S, Harvey S, Dandeker C, Burdett H, Greenberg N, Fear NT, et al. Life in and after the Armed Forces: Social networks and mental health in the UK military. *Sociology of Health & Illness*. 2013;35(7):1045-64.
12. Donovan NJ, Blazer DG. Social isolation and loneliness in older adults: Review and commentary of a National Academies report. *American Journal of Geriatric Psychiatry*. 2020;28(12):1233-44.
13. Mahar AL, Cyr KS, Enns JE, Aiken AB, Whitehead M, Cramm H, et al. Canadian Veteran chronic disease prevalence and health services use in the five years following release: a matched retrospective cohort study using routinely collected data. *BMC Public Health*. 2022;22(1):1678.

14. Davis J. Anxiety disorders. In: Brown C, Stoffel VC, editors. Occupational therapy in mental health: A vision for participation. 1st ed. Philadelphia, PA, USA: F. A. Davis Company; 2011. p. 167-77.
15. Ellis S, Noyes K. By the People: A history of America as volunteers. 2nd ed. San Francisco, CA, USA: Jossey Bass; 1990.
16. Finkelstien M. Intrinsic vs. extrinsic motivational orientations and the volunteer process. *Personality and Individual Differences*. 2009;46:653-8.
17. Stephens C, Breheny M, Mansvelt J. Volunteering as reciprocity: Beneficial and harmful effects of social policies to encourage contribution in older age. *Journal of Aging Studies*. 2015;33:22-7.
18. Utz RL, Carr D, Nesse R, Wortman CB. The effect of widowhood on older adults' social participation: An evaluation of activity, disengagement, and continuity theories. *Gerontologist*. 2002;42(4):522-33.
19. Conneeley A. Transitions and brain injury: A qualitative study exploring the journey of people with traumatic brain injury. *Brain Impairment*. 2012;13(1):72-84.
20. Eichler M, Cramm H, Tam-Seto L, Smith-Evans K, Ritchie K. Longitudinal qualitative study on the health and well-being of military Veterans during military to civilian transition. *Veterans Affairs Canada*; 2020.
21. Edgelow M, Zanatta A, Williams A, Hill S, Tam-Seto L, Cramm H. Time use during the military-civilian transition: Exploring concepts of occupational disruption, transition, and balance. *Journal of Occupational Science*. 2023.
22. Blackburn D. Out of uniform: psychosocial issues experienced and coping mechanisms used by Veterans during the military–civilian transition. *Journal of Military, Veteran and Family Health*. 2017;3(1):62-9.
23. Suk Ching Liu E, Ching C, Wu J. Who is a volunteer? A cultural and temporal exploration of volunteerism. *Journal of Human Behaviour in the Social Environment*. 2017;27(6):530-45.
24. World Health Organization. Health Promotion Glossary of Terms 2021. Geneva: World Health Organization; 2021.
25. Peters M, Godfrey C, McInerney P, Munn Z, Tricco A, Khalil H. Scoping reviews. 2020. 2024. In: *JBI Manual for Evidence Synthesis* [Internet]. Melbourne, AU: JBI.
26. Tricco A, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA extension for scoping reviews (PRISMA-ScR): checklist and explanation. *The PRISMA-ScR Statement*. *Ann Intern Med*. 2018;169(7):467-73.
27. Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Goffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ*. 2021;372(n71).
28. Kranke D, Gable AR, Weiss EL, Dobalian A. "I'm in a good place now": A case study of empowerment of a combat veteran engaged in peer-led disaster relief. *Social work in Mental Health*. 2017;15(6):663-76.
29. Kranke D, Weiss EL, Gin J, Der-Martirosian C, Constantine Brown JL, Saia R, et al. A "Culture of Compassionate Bad Asses": A Qualitative Study of Combat Veterans Engaging in Peer-Led Disaster Relief and Utilizing Cognitive Restructuring to Mitigate Mental Health Stigma. *Best practices in Mental Health*. 2017;13(1):20-33.

30. Kranke D, Weiss EL, Heslin KC, Dobalian A. "We Are Disaster Response Experts": A Qualitative Study on the Mental Health Impact of Volunteering in Disaster Settings Among Combat Veterans. *Social work in Public Health*. 2017;32(8):500-9.
31. Lawrence KA, Matthieu MM, Robertson-Blackmore E. Completion of a veteran-focused civic service program improves health and psychosocial outcomes in Iraq and Afghanistan veterans with a history of traumatic brain injury. *Military Medicine*. 2017;182(7):e1763-e70.
32. Lawrence KA, Matthieu MM. Perceived family impact of volunteering among reintegrating post-9/11 Veterans. *Journal of Family Social Work*. 2018;21(4-5):271-93.
33. Matthieu MM, Meissen M, Scheinberg A, Dunn EM. Reasons Why Post-9/11 Era Veterans Continue to Volunteer After Their Military Service. *The Journal of Humanistic Psychology*. 2021;61(3):405-26.
34. Matthieu MM, Lawrence KA, Gould O, Scheinberg A. Veterans Volunteering: An Emerging Practice and Satisfaction with a Civic Service Program for U.S. Veterans Returning from Iraq and Afghanistan. *Best Practices in Mental Health*. 2018;14(1):93-111.
35. Livingston WS, Carter SP, Leitner R, Ton AT, Gebhardt H, Zoellner LA, et al. A Peer Veteran Approach to the Caring Letters Suicide Prevention Program: Preliminary Data. *Psychological Services*. 2024;21(1):1-12.
36. Piette JD, Marinec N, Chen J, Yon S, Maly M, Pfeiffer PN. Pilot study of an English language coaching opportunity for volunteering among US military Veterans with depression, anxiety, and/or post-traumatic stress disorder. *Journal of Affective Disorders Reports*. 2024;16:100761.
37. Albright DL, McDaniel JT, Godfrey K, Thomas KH, Fletcher KL, Rosen G. Civic engagement among student veterans. *Journal of American College Health*. 2020;68(4):387-94.
38. Campbell HM, Raisch DW, Sather MR, Warren SR, Segal AR. A comparison of veteran and nonveteran motivations and reasons for participating in clinical trials. *Military Medicine*. 2007;172(1):27-30.
39. Sharp ML, Jones M, Burdett H, Fear NT. Volunteering behaviours among UK military Veterans during the COVID-19 pandemic and associations with health and well-being. *Journal of Military, Veteran and Family Health*. 2023;9(3):50-61.
40. Baktir Y, Sillah A. Volunteer Service After The Volunteer Service: Sector Of Employment And Veteran Volunteering. *Public administration quarterly*. 2021;45(3):256-77.
41. Nesbit R, Reingold DA. Soldiers to Citizens: The Link between Military Service and Volunteering. *Public Administration Review*. 2011;71(1):67-76.