



THE SECRETARY OF VETERANS AFFAIRS
WASHINGTON

October 1, 2025

The Honorable Jerry Moran
Chairman
Committee on Veterans' Affairs
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

In accordance with the requirements of Section 201(k)(2) of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019, P.L. 116-171, enclosed is the Department of Veterans Affairs (VA) Final Report on the provision of grants through the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP). The SSG Fox SPGP is uniquely positioned to help communities tailor resources to meet the needs of Veterans with risk for suicide, facilitate Veteran engagement with VA benefits and health care, and provide alternative means of suicide risk reduction for those who may choose not to engage with VA.

In addition, as required by 38 U.S.C. §116, a statement of cost for preparing the report is included. This report has been sent to the leaders of the House and Senate Committees on Veterans' Affairs.

Sincerely

A handwritten signature in blue ink, appearing to read "D. Collins", written over the printed name "Douglas A. Collins".

Douglas A. Collins

Enclosures

DEPARTMENT OF VETERANS AFFAIRS



Congressionally Mandated Report

Final Report on the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP)

August 2025

Table of Contents

Introduction.....	3
Report Language	4
Methodology.....	5
Measures	7
Final Report Mandatory Components.....	7
(A) Grant Program Operations.....	7
(B) Assessment of Effectiveness.....	9
(C) Participant Demographics and VA Referrals	16
(D) Capacity Assessment.....	17
(E) Feasibility and Advisability of Extending or Expanding Provision of Grants.....	17
(F) Considerations.....	22
Appendix 1-Acronyms	25
Appendix 2-Grantee Journey Map	26
Appendix 3-Detailed Description of Instruments.....	26
Appendix 4-Eligibility Determination.....	28
Appendix 5-Grant Recipients, Grant Amounts and Budgeted Operating Costs.....	31
Appendix 6-Participant Demographic Characteristics Disaggregated by Grant Recipient	36
a. Participant Self-Identified Sex (§ 201 (k)(1)(B)(iii)(I))	36
b. Participant Marital Status (§ 201 (k)(1)(B)(iii)(I))	39
c. Participant Age (§ 201 (k)(1)(B)(iii)(I)).....	44
d. Participant Race and Ethnicity (§ 201 (k)(1)(B)(iii)(I)).....	48
e. Participants Enrolled in the Patient Enrollment System of the Department under 38 U.S.C. §1705(a).....	53
f. Participant Branch of Service in the Armed Forces (§ 201(k)(1)(B)(iii)(III))	57
g. Participant Era of Service in the Armed Forces (§ 201(k)(1)(B)(iii)(IV))	62
h. Type of Services Received by Participants*.....	67
i. Eligible Individual Referrals to the Department (§ 201(k)(1)(B)(viii)).....	70
j. Eligible Individuals Newly Enrolled in Veterans Health Administration Based on Referral from a Grant Recipient.....	75
References	79

Introduction

The Department of Veterans Affairs (VA) Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP) is authorized by Section 201 of the [Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019, P.L. 116-171](https://www.Congress.gov/116/plaws/publ171/PLAW-116publ171.pdf) (<https://www.Congress.gov/116/plaws/publ171/PLAW-116publ171.pdf>), [38 U.S.C. § 1720F \(Note\)](https://www.govinfo.gov/content/pkg/USCODE-2023-title38/pdf/USCODE-2023-title38-partII-chap17-subchapII-sec1720F.pdf) (<https://www.govinfo.gov/content/pkg/USCODE-2023-title38/pdf/USCODE-2023-title38-partII-chap17-subchapII-sec1720F.pdf>). Program details are available via the regulations at [38 C.F.R. part 78](https://www.ecfr.gov/current/title-38/chapter-I/part-78) (<https://www.ecfr.gov/current/title-38/chapter-I/part-78>). The SSG Fox SPGP public website at <https://www.mentalhealth.va.gov/ssgfox-grants/> includes a list of organizations awarded grants (grantees).

The grants are a core aspect of VA's 10-year National Strategy for Preventing Veteran Suicide (2018-2028).¹ Recognizing that suicide prevention must extend beyond clinical settings, the SSG Fox SPGP advances efforts into non-clinical areas like financial, occupational, legal, and social support services. This program fills an important gap in meeting Veterans where they are, particularly those not recently engaged with VA.

Services address both mental health and social needs, such as economic hardship and access to care. The program also emphasizes social connectedness through peer and family engagement and offers opportunities for faith-based and innovative interventions. Since its launch, SSG Fox SPGP has awarded \$157.5 million to 94 organizations² across 43 states, U.S. territories, and federally recognized tribal nations.

Each grantee's program concept is comprised of a unique menu of approved services that are implemented in varied ways to meet the community's needs and tailored to the unique needs for suicide prevention services for eligible individuals and their families.³ Grantee program concepts also vary by the type of eligible entity, size, and location of the geographic service area, projected number of Veterans to serve, award amount, and year of implementation. Some grantees propose to serve more Veterans by implementing a high-level brief engagement and referral model, while other grantees offer in-depth and lengthy programming to a smaller number of Veterans with more complex needs. One-to-one comparison between grantees within this report is limited by these factors.

The SSG Fox SPGP's [Interim Congressionally Mandated Report](https://www.govinfo.gov/content/pkg/CMR-VA1-00189018/pdf/CMR-VA1-00189018.pdf) (CMR), available at <https://www.govinfo.gov/content/pkg/CMR-VA1-00189018/pdf/CMR-VA1-00189018.pdf>, provided early implementation data from the initial award announcement on September

¹ U.S. Department of Veterans Affairs. (2018) National Strategy for Preventing Veteran Suicide 2018-2028. https://www.mentalhealth.va.gov/suicide_prevention/docs/Office-of-Mental-Health-and-Suicide-Prevention-National-Strategy-for-Preventing-Veterans-Suicide.pdf

² One organization, Lubbock Regional MHMR Center dba StarCare Specialty Health System, was awarded in 2024 then declined the funds pre-operations, so are not included in this total.

³ 38 C.F.R. §§ 78.15, 78.25. <https://www.ecfr.gov/current/title-38/chapter-I/part-78>

19, 2022, through September 30, 2023. This final report includes data from September 19, 2022, through March 31, 2025. Per statute, data presented here include all reporting requirements of the interim report, outcomes of effectiveness of the provision of the grants including the effectiveness of community partners in conducting outreach to eligible individuals and their family and reducing the rate of suicide among eligible individuals, an assessment by state of the increased capacity of VA to provide services to eligible individuals and their families as a result of the SSG Fox SPGP, and the feasibility and advisability of extending or expanding the program and recommendations.

Through March 2025, SSG Fox SPGP grantees reported 51,401 distinct outreach efforts, including 10,844 trainings promoting the program and suicide prevention to the wider community. A total of 24,980 individuals were screened for SSG Fox SPGP eligibility. The 12,650 individuals deemed ineligible for SSG Fox SPGP services received local referrals to mitigate their presenting needs and education of available crisis resources such as the 9-8-8 Suicide and Crisis Lifeline.

Grantees registered 9,961 eligible individuals (9,503 Veterans and 458 active duty Service members) in SSG Fox SPGP services, with an additional 1,749 individuals in the screening process at time of this data collection and an additional 620 family members engaged. Grantees successfully intervened to provide 755 emergency mental health referrals for those with signs of imminent risk. Additionally, 8,461 non-emergency mental health referrals were made for those on a pathway to risk, as the program takes an upstream approach to reach Veterans with some, but not necessarily acute and/or chronic, risk for suicide. The SSG Fox SPGP facilitates engagement with (and reduces barriers to) clinical mental health care and is unique in that most services are non-clinical. Of the 1747 Veterans participating in grantee services who had never previously enrolled in the Veterans Health Administration (VHA), 42% (726) accepted grantee assistance in facilitating new VHA enrollment, which is a known protective factor⁴ for at-risk Veterans. In addition to those new to VHA services, 748 Veterans reported that they had not received any VA service or benefit in the year prior to engaging with SSG Fox SPGP. Grantees arranged 9,562 social services referrals on behalf of participants.

Results show that over 80% of the 1,722 participants who completed services and completed pre- and post-assessment mental health screens show improvement in mental health status, well-being, social support, and financial stability and a decrease in suicide risk.

Report Language

VA is required to submit a final report no later than 3 years from the date of first award

⁴ U.S. Department of Veterans Affairs, Office of Suicide Prevention. 2024 National Veteran Suicide Prevention Annual Report. 2024. https://www.mentalhealth.va.gov/suicide_prevention/data.asp

(September 19, 2025) and an annual report thereafter for each year in which the program is in effect (P.L. 116-171 § 201(k)(2)). This final report addresses the mandatory components outlined in § 201(k)(1)(B)(i-xii), organized into the following six sections:

- A. Grant Program Operations
- B. Assessment of Effectiveness
- C. Demographics of Participants
- D. Capacity Assessment
- E. Feasibility and Advisability of Extending or Expanding the Program
- F. Recommendations

For purposes of this report, all relevant definitions follow those noted in the Notice of Funding Opportunity (NOFO) and regulations (38 C.F.R. part 78).

Methodology

This final report provides an overview of the grant management implementation approach, methods used for assessing the effectiveness of the SSG Fox SPGP, and offers recommendations, as required. The evaluation plan's methodology is representative of existing literature on feasibility studies,⁵ the U.S. Government Accountability Office (GAO) guidance on pilot studies,^{6 7} and statutory guidance in the Foundations for Evidence-Based Policymaking Act of 2018, P.L. 115-435 (Evidence Act),⁸ related to capacity assessments and applied to this program evaluation.

Data were collected from 94 unique agencies from September 19, 2022, until March 31, 2025.⁹ The data collected used a mixed methods approach suited to understanding both quantitative elements including the number of grantees or number of eligible individuals completing assessment instruments and qualitative elements such as narrative responses to questions on the grantee progress reports.

Data collected from the grantees included the following:

- Deidentified participant demographics, eligibility status, suicide risk, and psychosocial needs;
- Psychometrically valid instruments and measures as determined by VA to support individual service plan development and complete the required program evaluation;
- Grantees biannual progress reporting and progress monitoring; and

⁵ Orsmond, G. I., & Cohn, E. S. (2015). The Distinctive Features of a Feasibility Study: Objectives and Guiding Questions. *OTJR : occupation, participation and health*, 35(3), 169–177. <https://doi.org/10.1177/1539449215578649>

⁶ Government Accountability Office. (2016). *Section 5 Pilot Design Issues Need to Be Addressed to Meet Goal of Reducing Recipient Reporting Burden*. [GAO-16-438] <https://www.gao.gov/products/gao-16-438>

⁷ Government Accountability Office. (2022). *Additional Action Needed to Assess the Medical Scribe Pilot*. [GAO-23-105712] <https://www.gao.gov/products/gao-23-105712>

⁸ Foundations for Evidence-Based Policymaking Act of 2018, Public Law 115 - 435 (2018). <https://www.govinfo.gov/app/details/PLAW-115publ435>

⁹ This end data point of the reporting period was chosen to comply with the requirement that the CMR be submitted no later than September 19, 2025.

- Financial management (e.g., grantee organization's legal name, annual award amount) and business audits.

Data collected from SSG Fox SPGP grantees have proven beneficial for required legislative reporting, program management, and evaluation. Data from the grantees were obtained and submitted as part of the grantees' workflow in delivering suicide prevention services to participants (Appendix 2). VA has various efforts in place to minimize missing data from participants and grantees, such as providing a web-based data collection tool, offering technical assistance for data collection, and minimizing the amount of data collected. The data collection tool tracks outreach, participant demographic, and baseline mental health and post assessment data, services provided, and referrals made with the ability to assess potential best practices or technical assistance needed.

Grantees performing below satisfactory on biannual performance reports receive written feedback on areas of concern, which could include the low number of individuals screened and served relative to their projection and low spend-down rates. Grant managers facilitate various group meetings monthly (for example, all-grantee, new grantee, special cohorts), and meet with grantees one-on-one as requested or indicated based on performance.

Each grantee's program concept, including the projected number of individuals to be served with their programs, is different. VA is using data to consider if specified program models are appropriate for future iterations of the SSG Fox SPGP. Grant managers and technical assistance partners continue to support and guide grantees to improve performance. Staff turnover and vacancies at several grantee sites have continued to impact timeliness for program implementation and services.

Additional data used in this report include other program data curated or maintained by the SSG Fox SPGP staff or data collection tool data repository to meet the final report requirements for a capacity assessment. We utilized the GAO definition of capacity assessment¹⁰ to assess the coverage, quality, methods, effectiveness, and independence of the statistics, evaluation, research, and analysis efforts of the program. For each of these areas we applied all five of the above criteria to the assessment of the SSG Fox SPGP's current capacity.

In addition to considering these criteria, which is consistent with the Evidence Act, we addressed key questions related to future capacity that aligns with the final report requirements related to feasibility and advisability to extend or expand the program (see Section E). We collected or leveraged data from multiple program sources or interviews to inform our SSG Fox SPGP capacity assessment. These included the following:

- Reviewing the SSG Fox SPGP current evidence activities;

¹⁰ Government Accountability Office. (2021). *Program Evaluation: Key Terms and Concepts*. [GAO-21-404SP] <https://www.gao.gov/assets/gao-21-404sp.pdf>

- Reviewing the SSG Fox SPGP staff and contractors working on evidence activities and their research, evaluation, analysis, and statistical capacity; and
- Collection of data on current versus future staffing models and capacity for each evidence type.

Data were analyzed using descriptive statistics to include frequencies, percentages, means, and ranges, as noted and where appropriate. Qualitative data were compiled via narrative responses to grantee performance report questions on program operations. These qualitative data were content analyzed using rapid template analysis by a team of master's level trained analysts. Data are then summarized and reviewed for program challenges and improvements and are monitored over time by the SSG Fox SPGP. Quotes selected from this data for presentation in this report were chosen to illustrate the ongoing process of program development, implementation, and impact.

VA has not shared this data set with partners. VA anticipates sharing as part of the CMR process to include future communications with invested parties after publication of this report. VA does not plan to work with certain identified partners to release data or information beyond what is included in this report (§ 201(k)(1)(B)(vii)).

Measures

The validated instruments were chosen by the SSG Fox SPGP evaluation design team in consultation with subject matter experts (SME) to align with program goals of improving mental health status, well-being, social support, and financial stability, and reducing suicide risk of eligible individuals and their families (§ 201(h)(2)).

The measurement tools noted in Table 1 include those used to assess the effectiveness of the SSG Fox SPGP. A detailed description of the validated instruments and measures can be found in Appendix 3.

Table 1: Validated Instruments and Measures

Domain	Eligibility Tool
Suicide Risk	Columbia-Suicide Severity Rating Scale (C-SSRS)
Domain	Instruments for Baseline and Post Mental Health Screening
Financial Stability	Socio-Economic Status (SES)
Mental Health Status	Patient Health Questionnaire (PHQ-9)
Well-being	Warwick-Edinburgh Mental Well-being Scale (WEMWBS)
	Generalized Self-Efficacy (GSE)
Social Support	Interpersonal Support Evaluation List (ISEL-12)

Final Report Mandatory Components

(A) Grant Program Operations

This section provides information on VA and grantee operations costs to include the following elements required for the final report:

1. Operating Costs: A detailed account of how the grant funds were used, including executive compensation, overhead costs, and other indirect costs (§ 201(k)(1)(B)(x)).
2. Grant Recipients: A list of grant recipients and their partner organizations, if any, that delivered services funded by the grant and the amount of such grant received by each recipient and partner organization (§201(k)(1)(B)(ii)).

1. VA Program Operations Costs

The 5-year budget for grants operations, which includes VA executive compensation, total overhead cost, and other indirect costs is \$189,577,106.49 and is reflected as total regulatory budget impact in Table 2. This includes the \$52.5 million awarded to grantees annually over three grant cycles, totaling \$157,500,000. Over fiscal years (FY) 2022 to 2025, VA issued awards at the end of each FY to fund services that began in the following FY. Costs began in FY 2021 to support the regulation and program development.

Table 2: SSG Fox SPGP Cumulative Grant Operations Budget (FY 2021-2025)

Full Time Employee (FTE) Salary and Benefits Costs	Travel Costs	Administrative and Implementation Costs	Net Costs	Net Transfers: Grant Appropriations	Total Regulatory Budget Impact
\$3,472,733	\$121,537	\$12,309,593	\$16,173,243	\$157,500,000	\$189,577,106

2. Grantee Operations Costs

Appendix 5 includes a table of the grant recipients, their total grant award as required by § 201(k)(1)(B)(ii)), and includes an accounting of how grant funds were used by grantees as directed by §201 (k)(1)(B)(x) to the extent available.

VA reviews grantee expenditures to ensure timeliness and alignment with regulations. Monitoring grantee expenditures monthly affords VA insight into service demands and projected spend rates. VA provides technical assistance to grantees and formulates strategies to ensure 100% drawdown of funds before the end of the approved budget period for each FY. When grantees determined a need for budget period extension to complete the mission of program implementation, grantees made a request to VA, as

per 2 C.F.R. § 200.308.¹¹ Extensions to budget periods of up to 1 year were authorized upon grantee request. In Year 1, VA approved 73 extensions and grantees were successful in utilizing funds. In Year 2, VA approved 73 extensions and provided ongoing technical assistance and expenditure review with grantees. For Year 3, seven grantees did not reapply; one did not pass the Year 3 threshold review as per 38 C.F.R. §78.20, and 12 grantees requested less funds than in past years. This situation allowed VA's ability to issue an additional 13 new awards in Year 3. The budgeted operating costs are provided in Appendix 5.

Through a service level agreement (SLA), the Office of Business and Oversight (OBO) conducts audits of grantees that have completed at least 1 full year of service. OBO conducted audits on 52 grantees as of March 31, 2025, and has 30 scheduled before September 30, 2025. OBO comprehensively evaluates programs to obtain reasonable assurance that transactions are completed in compliance with SSG Fox SPGP and Federal requirements and that Federal assets are adequately safeguarded. An itemized accounting of fund use is found in Appendix 5.

(B) Assessment of Effectiveness

This section includes the following required components:

1. Effectiveness of Outreach: The effectiveness of grant recipients and their grant partners, if any, in conducting outreach to eligible individuals and their families (§201(k)(1)(B)(i)(I)).
 - A description of any outreach activities conducted by the eligible entity in receipt of a grant with respect to services provided using the grant (§ 201(k)(1)(B)(xi)).
2. Effectiveness of Increasing Services: The effectiveness of increasing eligible individuals' engagement in suicide prevention services (§ 201(k)(1)(B)(i)(II)).
3. Measured Outcomes: Such other validated instruments and additional measures as determined by the Secretary (§ 201(k)(1)(B)(i)(III)).
 - Number of Measures at Baseline and Baseline and Post (Two Time Points) (§ 201(k)(1)(B)(vi)).
 - Effectiveness of Engagement in Suicide Prevention Services (§ 201(k)(1)(B)(i)(III)).
4. Effectiveness of the Provision of Grants: under this section, including the effectiveness of community partners in conducting outreach to eligible individuals and their families (reported in section 1 above) and reducing the rate of suicide among eligible individuals (§ 201(k)(2)(i)).

1. Effectiveness of Outreach

¹¹ 2 C.F.R. § 200.308, Revision of Budget and Program Plans <https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-D/section-200.308>

For the purposes of this grant program, outreach is defined as efforts to promote awareness of the program to identify potential eligible individuals in the grantee's suicide prevention services, particularly those most at risk or not connected to VA care. Grantees reported conducting 51,401 distinct outreach efforts from September 19, 2022, through March 31, 2025. In addition, the program has seen an over 300% growth in outreach services delivered in community settings comparing the first 6 months of program launch (3,580) to the most recent 6-month period (11,104). Therefore, the SSG Fox SPGP is effective in conducting outreach to engage eligible individuals.

Description of Grantee Outreach Efforts and Activities

Grantees provided data on outreach activities that were grouped into five categories following VA's established internal guidance on suicide prevention outreach:¹² training, awareness activities, mailings, coalition meeting, and media or marketing. For the purposes of this grant program:

- Training is suicide prevention education as specified in 38 C.F.R. § 78.55;
- Awareness activities encompass efforts to provide information and promote awareness of programs;
- Mailings may be to potential eligible individuals, caregivers, or community partners;
- Coalition meetings are specific to sharing program information at a local suicide prevention coalition meeting; and
- Media and marketing may entail an interview, social media, paid campaign, or public service announcement.

In addition to promoting general awareness and reducing stigma, many of the outreach efforts, such as training to service providers, establish and strengthen the referral network into and from grantee programs. Outreach has a vital role in locating eligible individuals to serve and is also important to capacity building for the program and community broadly.

Table 5 below depicts the type and number of outreach activities. Within each distinct outreach effort (51,401 total), grantees may have reported one or more activities. This is because grantees may conduct multiple outreach activities within each unique outreach effort or event. Also, some grantees have robust existing referral streams such that no additional outreach is needed to identify prospective individuals to enroll in the program.

Table 5: Grantee Reported Outreach Activities by Category

¹² U.S. Department of Veterans Affairs. (2010). Guidance for Entering Suicide Prevention Application Network (SPAN) Outreach. Internal VA document: unpublished.

Suicide Prevention Outreach Category	Total Outreach Activities September 19, 2022-March 31, 2025
Training	10,844
Awareness Activities	47,471
Mailings	789
Coalition Meeting	3,610
Media and Marketing	4,479
Total Outreach Activities	51,401

2. Effectiveness of Increasing Services

During this reporting period, 10,581 participants (eligible individuals and family members) were enrolled in grantee programs. Of these, 68%, or 8,373 individuals received at least one suicide prevention service or referral, other than a mental health screen. Comparing the first 6 months of the program to the 6 months from October 1, 2024, through March 31, 2025, the number of participants receiving at least one service or referral rose from 512 to 2,481, a 386% increase. Therefore, the SSG Fox SPGP is effective in increasing services delivered by grantees in community-based settings as demonstrated by the growth of services delivered to eligible participants each year since the program launch.

All grantees are required to provide the baseline mental health screening. Only enrolled eligible individuals receive the baseline mental health screening after eligibility has been determined and the individual has agreed to enter grantee services. The validated instruments described below identify participants' needs related to mental health, financial stress, social support, and well-being to build an individualized service plan.

Appendix 6 lists participant services by grantee.

3. Measured Outcomes

This section describes outcomes related to the use of validated instruments and additional measures as determined by the Secretary (§ 201(k)(1)(B)(i)(III)).

"I have been getting help through the VA and their affiliates and yet still feeling hopeless and struggling to connect, feeling isolated and alone and then someone referred me to the Staff Sergeant Fox Program. I found support, a glimmer of hope and people that are helping me to feel not so isolated and alone. I'm still in the program and I'm still struggling, but without the people and the support of the Staff Sergeant Fox Program, I honestly don't know how I would've gotten through the last few months."

– SSG Fox SPGP Participant

SSG Fox SPGP eligibility determination has three components: Veteran status per

Hannon Act § 201(q)(4), one or more psychosocial risk factors, and at least low on the C-SSRS, which is the screening tool approved by the Department per [38 C.F.R. §78.10](https://www.ecfr.gov/current/title-38/chapter-I/part-78/section-78.10) (<https://www.ecfr.gov/current/title-38/chapter-I/part-78/section-78.10>).

As of March 31, 2025, 24,980 applicants were screened for eligibility.

- a. Of those 10,581 participants who were deemed eligible, agreed to enter services, and began services, 3,609 (29%) were closed out without completing the program.
- b. Of those 3,609 closed without completing the program, the reasons for noncompletion include: 35% withdrew before services began, 61% withdrew after services began, while others (4%) were closed for reasons such as hospitalization or incarceration longer than 31 days.
- c. An additional 1,749 applicants had begun the screening process but had not yet completed an eligibility determination as of the date of the data extraction.

In addition, 12,650 individuals were screened and found ineligible and thus received referrals elsewhere or services under different funding streams to mitigate their presenting concerns (§ 201(k)(1)(B)(xii)). The benefit of those linkages is a part of the program's overall impact.

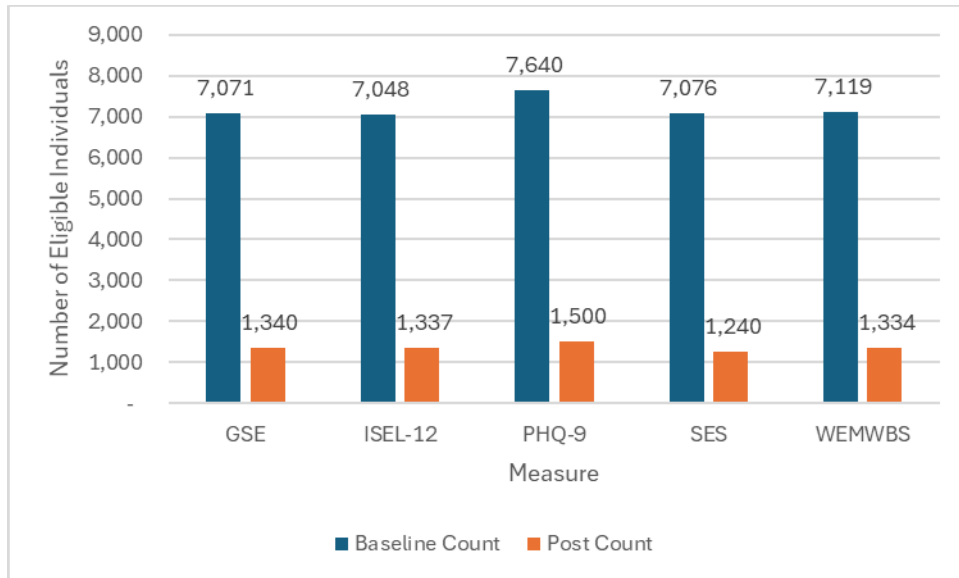
Grantee staff administered a baseline initial mental health screening for 79% of eligible individuals (7,834/9,961) using at least one of the four validated instruments (General Self-Efficacy (GSE) scale, Interpersonal Support Evaluation List-12 (ISEL-12), Patient Health Questionnaire-9 (PHQ-9), and the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)), and the additional Socio-Economic Status (SES) measure. (See Appendix 3.)

Number of Measures at Baseline and Baseline and Post (Two Time Points)

Figure 1 demonstrates the number of eligible individuals whose mental health status, well-being, and suicide risk received a baseline measurement screening pre-services and were measured over a period of time for any improvement (§ 201(k)(1)(B)(vi)). While there are differences in the amount of before and after data available,¹³ VA continues to provide grantees with performance feedback on the required baseline mental health screening. Thereafter are data on the number of eligible individuals who repeated the screenings upon program completion.

Figure 1: Total Number of Screenings Using Measures at Baseline and Two Time Points for Eligible Individuals from September 19, 2022, to March 31, 2025

¹³ In the Interim CMR, VA only included an eligible individual's pre/post assessment scores if VA received the post-assessment form after the individual was marked as "complete" on a disposition form. This workflow ensured that mid-point or other uses of the assessment score were not included in the final count. However, further analysis indicated that over half of all completed post-assessment forms were not being included using this rule, and in fact nearly 200 eligible individuals were excluded because the post-assessment form was received earlier in the same day as the disposition form. VA also learned that grantees did not have a common understanding of the workflow or the reasoning behind it. For this Final CMR, VA therefore elected to count all eligible individuals marked as complete, having both a pre and post assessment form, regardless of the dates the forms were received.



Effectiveness of Engagement in Suicide Prevention Services

Results to date indicate that all five of the reported measures had statistically significant ($p < .01$) changes different from zero.¹⁴

Eligible individuals with both a pre and post assessment showed statistically significant improvement in all four mental health measures and a socio-economic status measure from baseline to completion, and the number with “moderate to severe depression” declined by 27 percentage points.

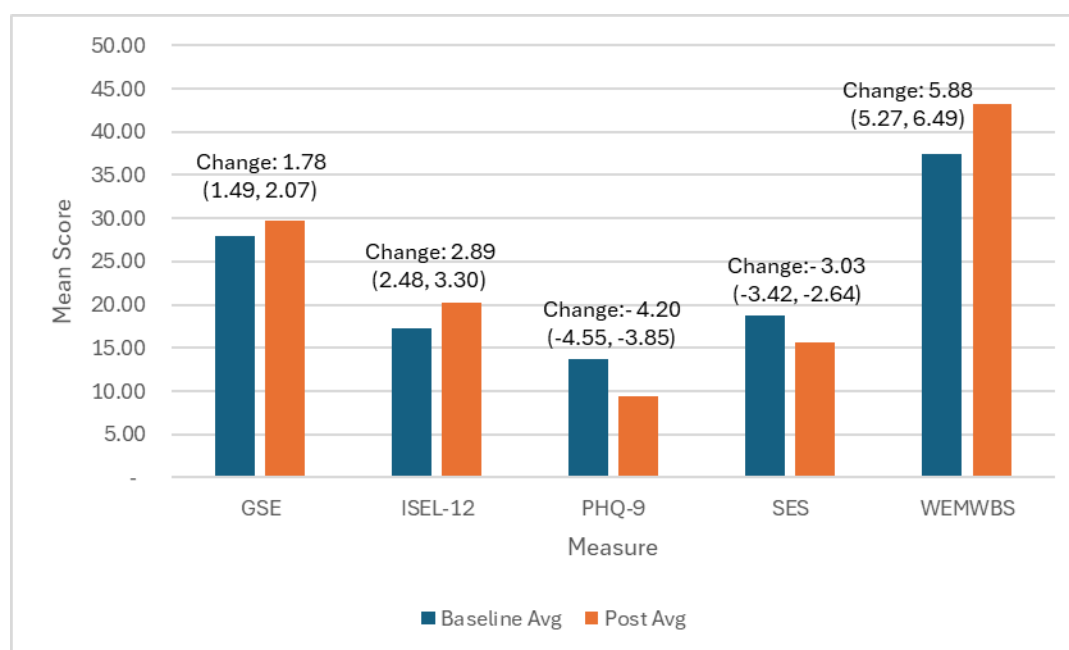
¹⁴ Care should be taken in interpreting this result as it only reflects data collected from participants who completed the program and who elected to complete the forms on exit. A positive result as seen here provides confirmatory evidence (is consistent with) positive results overall but is preliminary and not definitive.

Table 6: Baseline and Post-completion Scores by Program Completers for Four Mental Health Measures and One Socio-Economic Status Measure

Measure	Baseline Average	Post Average	Change Average	Direction of Change Desired	Count	Standard Error of Change
GSE	27.98	29.76	1.78	increase	1,340	0.15
ISEL-12	17.32	20.21	2.89	increase	1,337	0.21
PHQ-9	13.65	9.46	-4.20	decrease	1,500	0.18
SES	18.72	15.69	-3.03	decrease	1,240	0.20
WEMWBS	37.40	43.28	5.88	increase	1,334	0.31

The change scores are also displayed visually in Figure 2 below, using bar charts to show the average baseline and average post-completion score for each measure, as well as the average change in the measure and the 95% confidence interval around the estimated change.

Figure 2: Average Changes in Four Mental Health Screening Measures and a Socio-Economic Status Measure among Eligible Individuals with Both Pre and Post Assessment Scores



Indirect measures of reductions in suicide risk in this program are available, statistically valid, and reported here. These include reductions in identified risk factors as measured by validated instruments such as the Interpersonal Support Evaluation List, the Patient Health Questionnaire-9 (PHQ-9), and others. Notably, the PHQ-9 allows for the measurement of changes in suicidality and thoughts of self-harm. A study on the use of

item 9 in the PHQ-9 to examine suicidal ideation, suicide attempts or deaths provides support for use of this measure for answering reduction in suicidality.¹⁵

The PHQ-9 is also used as a clinical measure of depression. A score of 10 or higher indicates moderate to severe depression. The number of eligible individuals who scored 10 or higher at baseline was 1,057, or 70%. The number of those same participants indicating a PHQ-9 score of 10 or higher at completion was 641 or 43%, a decrease of 416 participants or 27 percentage points. This is a statistically significant reduction in the prevalence of moderate to severe depression in the participant population.

4. Effectiveness of the Provision of Grants: Suicide Rate Reduction

As confirmed with numerous VA and external SMEs, determining reductions in the rate of suicide among eligible individuals per § 201(k)(2)(i) is not feasible given the lack of a similar group of Veterans for comparison to eligible individuals participating in the SSG Fox SPGP. One common method for non-randomized group comparison is to use matching, a process that draws a sample for comparison based upon similar characteristics. Matching therefore requires that individuals be selected for the comparison group by their specific demographic and geographic characteristics as well as their current risk level for suicide and suicidal behaviors.

While VA may be aware of risk characteristics of the enrolled VA patient population using existing administrative data, these same characteristics for the general Veteran population outside of VA do not currently exist. However, even if personally identifiable information was available to VA on SSG Fox SPGP participants, there is a lack of a suitable population from which to draw a matching sample. Given that the SSG Fox SPGP participants are not required to utilize VA services and are allowed to opt out of VA services, they are not a suitable comparator to the VA patient population. Finally, comparators from a prospective cohort are unethical to assemble without enrolling a high-risk cohort and not provide them a service to ameliorate the potential risk of premature mortality by suicide.

Another analytic strategy is to compare county level mortality rates. However, there are many issues with this approach related to variation in surveillance, data quality, and challenges in attributing any changes at the county to the individual level. The low base rate of suicide also prohibits the ability to extrapolate meaningful conclusions from geographic areas where there is a small number of people in a high-risk population that do not go on to die by suicide. In sum, participant data do not solve this issue; the lack of comparison and the lack of power to estimate statically significant differences remain barriers. A group of SMEs in VA met to examine alternative approaches and determined that any assessment of suicide rate reduction from the SSG Fox SPGP would be methodologically flawed and inconclusive. VA later confirmed this conclusion with non-

¹⁵ Rossom, R. C., Coleman, K. J., Ahmedani, B. K., Beck, A., Johnson, E., Oliver, M., & Simon, G. E. (2017). Suicidal ideation reported on the PHQ9 and risk of suicidal behavior across age groups. *Journal of affective disorders*, 215, 77–84. <https://doi.org/10.1016/j.jad.2017.03.037>

VA SMEs. For these reasons, estimating the suicide rate reductions are not possible with the current data collection methods used in the SSG Fox SPGP.

(C) Participant Demographics and VA Referrals

This section includes a description of the participants as required in the final report. See Appendix 6 for the disaggregated data related to demographic characteristics, enrollment, branch of service, era of service, type of service received, and whether the eligible individual was referred to VA for care.

Individuals Served:

- There were 9,961 eligible individuals (9,503 Veterans and 458 active-duty Service members) supported by grants including through services provided to family members (§ 201(k)(1)(B)(iv)).¹⁶
 - A total of 10,581 participants were supported by grants for services delivered to eligible individuals and an additional 620 family members were supported.
 - See Appendix 6 for participant demographic characteristics, service, VA enrollment and referral details (§ 201 (k)(1)(B)(iii)(I-VI)).

New to VA Care:

- Among eligible Veterans who responded to this question, 1,747 or 18% (n=1747/9503) self-reported at the time of grantee intake that they had never been previously enrolled in VA care. This count excludes active duty Service members, as they are ineligible for full VHA enrollment.
 - Of the 1747 Veteran participants who were not previously enrolled with VHA, 726 (42%) became newly enrolled in VHA services as a result of the program.
 - An additional 748 Veterans were previously enrolled with VHA but had not engaged in any VA services or benefits in the year prior to reconnecting with support through SSG Fox grantee services.
- Eligible individuals described in § 201(q)(4)(B) are commonly referred to as having a discharge category of Other Than Honorable (OTH). The SSG Fox SPGP served 429/9,503 (4%) Veterans reporting an OTH discharge status (§ 201(k)(1)(B)(v)). This count excludes active-duty Service members, as they do not have a discharge status.

VA Referrals:

- The total number and percentage of eligible individuals for whom grantees reported making a referral to the health care enrollment point of contact at the Department under § 201(e)(3)(C), was 4,249 or 43% of eligible individuals (n=4249/9,961) (§ 201(k)(1)(B)(viii)). This count includes both Veterans and

¹⁶ Note that not every participant answered every demographic question, and some categories apply only to Veterans and not to their family members, so totals for each category (Marital status, sex, military service branch, etc.) will vary slightly.

active-duty Service members. Total VA referrals are reflected in Appendix 6i.

- A total of 726 Veterans who were never previously enrolled in VHA were referred to VHA by grantees. Note, data validating referrals to VHA are limited to individual and grantee report; this was not verified by VHA at the national level. See Appendix 6j.

Every individual screened by a grantee who is deemed ineligible for SSG Fox SPGP services receives referrals to mitigate their presenting concern and advisement of available crisis resources. Referral data for ineligible individuals have not been collected for two reasons: (1) to not burden grantees with additional reporting, and (2) because services to ineligible individuals are not reimbursable under the grant. Engaging individuals in the screening process and making referrals, even when they are determined to be ineligible, does have beneficial impacts for that individual, and on the grantee's organizational capacity to engage in broader community suicide prevention awareness using community-engaged outreach, engagement, and suicide screening approaches.

(D) Capacity Assessment

To design and implement the capacity assessment as required by statute (§ 201(k)(2)(B)(ii)), the SSG Fox SPGP engaged a group of key operations and evidence generating leaders in the program, current grant managers, and contractors to consider their experience with a variety of program data in completing this task. Evidence building activities were grouped into foundational fact finding, performance measurement, policy analysis, and program evaluation.

Findings reveal that the SSG Fox SPGP has developed the capacity to do the following:

- Conduct foundational fact finding to develop approved Federal regulations, annual NOFOs, and grantee financial and program audits.
- Develop and implement grantee performance measures and data collection systems to track initial startup, to use data to refine key performance indicators, and to track grantee progress in delivering services to eligible individuals and families dwelling in states where grantees operate, and close to where the eligible individuals and families live.
- Analyze and respond to organizational and Congressional policy requests.
- Evaluate the program as required for the interim and final reports using the existing evaluation plan and currently available funding, staffing, data, technology, analytic, evaluation, and statistical resources.

Within the implementation phase of the program, data collection technical assistance was provided to the grantees to submit complete data and support the ability to use data to drive decision making for programming within each community. There is room for improvement in the data collection, as current challenges remain in the consistency and usability of the data. There is an increasing need for more and better data to enable ongoing analysis, evaluation, research, and Congressional reporting on this program.

For instance, reporting on services provided by state is not yet available, as some grantees serve more than one state, and individual participant data can be sorted by grantee, but not yet by state. It will be imperative to carefully plan the future integration of community level data to achieve a population health perspective and to describe the impacts of this program for VA for the Veterans, families, and communities served.

The efforts of the program will require annual reassessment coinciding with the decision to fund new cohorts of grantees each year. This will be of paramount importance if the program is authorized for extension or expansion due to changes in the evaluation focus, program model, staffing, data collection needs, and requisite administrative, analytic, evaluation, and statistical tasks to support ongoing program evaluation and Congressional reporting. Therefore, we provide this analysis of capacity related to the future of the SSG Fox SPGP in the next section as it addresses this future programmatic state.

(E) Feasibility and Advisability of Extending or Expanding Provision of Grants

The SSG Fox SPGP is a critical initiative in addressing the mental health and well-being of the Nation's Veterans. Given its early successes in providing community-based support and timely access to services, there is a compelling case for the feasibility and advisability of extending and expanding this program.

Feasibility

Regarding feasibility, this evaluation determined that the SSG Fox SPGP can provide outreach and suicide prevention services, via the network of grantees that implemented the program across the country. Feasibility was quantitatively defined as having at least 70% sample retention (e.g., Of the 10,581 participants who were deemed eligible and began services, 3,609 (29%) were closed out without completing the program; thus achieving 71% retention), and no more than 25% missing data for outcome measures. For example, of those deemed eligible (n=10,581), 79% (8,321/10,594) completed an initial mental health screening at baseline using at least one of the four validated instruments and the additional SES measure; thus, with 21% missing data, meeting this goal of less than 25%.

Qualitative findings that impact feasibility reveal that, overall, grantees have overcome challenges to build their organizational capacity for their unique program model. They conduct outreach, provide a range of innovative services to eligible individuals, and utilize a tailored referral pathway for ineligible individuals to other services. Data presented herein note the variance in the demographic characteristics of service recipients, with attention to high-risk Veteran subpopulations and Veterans residing in lower resourced and rural areas.

Grantees have also demonstrated their programmatic capacity by routinizing data collection, using data to inform decision making for service planning, and integrating essential program components and standard operating procedures. Administratively,

they continue to effectively manage the financial aspects of the program amid the challenges with hiring and turnover of program staff. Finally, their biannual progress reports provide testimonials of success at the community, organization, staff, and participant level. Overall, these data answer the feasibility question by confirming that the SSG Fox SPGP works.

Advisability

Advisability is defined herein as a systematic analysis of monetary and non-monetary benefits and costs of sustaining the program, requiring ongoing evaluation and assessment of value propositions and resource tradeoffs. The overall advisability of maintaining the SSG Fox Program is supported by population data showing annual trends in all cause Veteran mortality.¹⁷

Suicide prevention remains a core mission and value for VA and a pressing issue among Veterans and in their communities, with many still facing barriers to accessing care. Data from this reporting period found that 18% of eligible individuals self-reported they never previously enrolled in VA health care. By increasing upstream community-based services, the program helps fill critical gaps in bringing Veterans into the VA continuum of health care and benefits. The SSG Fox SPGP also aligns with VA's broader goals of a public health approach to Veteran suicide prevention, as well as strengthen public trust in the VA's unwavering commitment to Veterans. Finally, qualitative data endorses local support for program sustainment and Veteran and family support for the program.

Regarding program benefits, we use Reach, Effectiveness, Adoption, Implementation, and Maintenance (RE-AIM), a widely used planning and evaluation model with five dimensions of individual- and setting-level outcomes important for program impact and sustainability.¹⁸ It is used herein to summarize and highlight essential program elements and beneficial impacts from participating in the SSG Fox SPGP. The following RE-AIM metrics, developed in collaboration with the program and in alignment with the requirements of the legislation, note the following outcomes.

- **Reach:** The SSG Fox SPGP reached 24,980 applicants who screened for eligibility between September 19, 2022, through March 31, 2025.
- **Effectiveness:**
 - Outreach
 - The program has seen an over 300% growth in outreach services delivered in community settings comparing the first 6 months after program launch in September 2022 (3,580) to the most recent 6-month period ending March 2025 (11,104).

¹⁷ U.S. Department of Veterans Affairs, Office of Suicide Prevention. 2024 National Veteran Suicide Prevention Annual Report. (2024). https://www.mentalhealth.va.gov/suicide_prevention/data.asp

¹⁸ Glasgow, R. E., & Estabrooks, P. E. (2018). Pragmatic Applications of RE-AIM for Health Care Initiatives in Community and Clinical Settings. *Preventing chronic disease*, 15, E02. <https://doi.org/10.5888/pcd15.170271>

- Increasing Services:
 - The program has seen a 386% growth in engagement in suicide prevention services comparing the first 6 months from program launch to the most recent 6-month period.
- Measured Outcomes: Such other validated instruments and additional measures as determined by the Secretary (§ 201(k)(1)(B)(i)(III)).
 - Over 80% of the 1,722 participants who completed services and completed a pre and post assessment showed health outcome improvements.
- Effectiveness of the Provision of Grants: under this section, including the effectiveness of community partners in conducting outreach to eligible individuals and their families and reducing the rate of suicide among eligible individuals (§ 201(k)(2)(i));
 - SSG Fox SPGP grantees reported facilitating 726 new VHA enrollments, a known protective factor, for at-risk Veterans.
 - 755 emergency mental health referrals for those with signs of imminent risk.
 - 8,461 non-emergency mental health referrals were made for those on a pathway to risk.
 - 9,562 social services referrals on behalf of participants.
 - Of the 3,433 participants who were referred to VA for mental health services, 77% previously reported enrollment in VA health care with 23% reporting no previous enrollment or pending enrollment.
- **Adoption:** Ninety-four discrete community-based organizations adopted the SSG Fox SPGP during the initial 3 years of program implementation from September 19, 2022, through March 31, 2025.
- **Implementation:** 14% (13/94) of grantees were awarded and implemented the program for only 1 year.
- **Maintenance:** 73% (68/94) of grantees were awarded and implemented the program consecutively for all 3 years.

Extension and Expansion

SSG Fox SPGP currently has 93 grantees, with an average award of \$640,000, which is approximately 85% of the maximum allowable award of \$750,000. Grant awards are anticipated to be funded at similar levels over the next 5 years unless the authority is amended to allow VA to make larger awards. VA anticipates a 5-year total cost of \$335.1 million to correspond with an extension of authority through 2030. The methodology assumes that 93 current grantees would continue for an initial cost of \$59.5 million in FY 2026 resulting in a total of \$297.0 million for 5 years. FY 2026 staff costs are estimated at \$1.2 million, and additional travel and operational costs are estimated at \$78,000 for a total amount of \$1.28 million. Projected annual inflation increases of 3.9% are expected to impact operational costs; as such, travel and

operational costs are expected to be \$1.3 million in FY 2026. The funding for FY 2026 through FY 2030 represents expected increases of 3.9% to operational costs.

In addition, SSG Fox SPGP currently has three contracts in place to monitor the grantees' performance of work and outcomes, provide technical engineering support to develop and maintain the web-based data collection tool, as well as provide technical assistance to grantees in the provision of suicide prevention services. Two SLAs will need to be maintained to ensure use of the payment management system as well as the program's audit and monitoring program. The funding for these contracts and SLAs amounts to \$5.6 million for FY 2026.

Expanding the program is defined as increasing the size of the SSG Fox SPGP and required a growth projection model. Although SSG Fox SPGP is currently present in 43 states, District of Columbia, Puerto Rico, Guam, and American Samoa, not all counties in each state are covered.

Each grant cycle, SSG Fox SPGP receives over 240 applications, with limited funding for new applicants, once current grantees are funded. As SSG Fox SPGP is fully implemented within current communities, the assessed need from applicants indicates that there is room for expansion. Recent Congressional Bills^{19 20 21} have proposed that should the SSG Fox SPGP be extended, the cap be increased to an amount between \$1.0 and \$1.5 million per eligible entity. Based on the current trend, and assuming the cap is increased to \$1.25 million, 85% was applied to create a new projection of approximately \$1 million per award. The methodology assumes that 93 current grantees would continue for an initial cost of \$93 million and 12 new grants for an additional \$12 million for a total of \$105 million in grant awards in FY 2026-2028, then an additional \$15 million in grant awards in FY 2029-2030. Administrative costs provide contract and SLA to provide for operation costs. If amended as described, with an increase of 15 new awards, the estimated cost for a 5-year period (FY 2026-2030) is \$592.5 million.

Given the program's demonstrated potential and the availability of a scalable model, extending and expanding the SSG Fox SPGP is both feasible and advisable. With careful planning, sufficient resourcing, and continued collaboration, the program can be scaled to deliver even greater impact in reaching Veterans and promoting long-term wellness.

¹⁹ A bill to amend the Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 to modify and reauthorize the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program of the Department of Veterans Affairs, S. 793 (2025). <https://www.congress.gov/bill/119th-congress/senate-bill/793>

²⁰ Building Resources and Access for Veterans' Mental Health Engagement Act of 2025, S. 609 (2025). <https://www.congress.gov/bill/119th-congress/senate-bill/609>

²¹ Helping Optimize Prevention and Engagement for Heroes Act of 2025, S. 1139 (2025). <https://www.congress.gov/bill/119th-congress/senate-bill/1139>

(F) Considerations

VA is encouraged by the promising impacts of the SSG Fox SPGP and thankful for Congressional support to extend and improve the program. The following represent potential options for consideration as the program matures.

1. **VA has benefited from two program-level reviews.** VA commissioned a third-party assessment (per § 201(l), submitted to Congress November 2024) and an expert meeting of the National Academies of Sciences, Engineering, and Medicine (April 2025). The workshop gathered leading scientists to examine the SSG Fox SPGP considering best practices in program development and oversight, grantee-level implementation, performance metrics, program evaluation, communicating program results, and offering strategies for increasing effectiveness across the life cycle of non-clinical community-based suicide prevention grants program.

Based on the findings of the third-party review and expert meeting, while tactical and strategic refinements to the current program model may improve management of the program, VA is encouraged by expert feedback of the strong program design and budding impact on communities, Veterans, and families. However, ongoing dissemination of the unique program model within the scientific community is needed to establish it as an emerging best practice in the provision of non-clinical suicide prevention services within community-based settings. External review that is tied to major changes in the program model would be optimal whereas annual Congressional reporting requirements that are not linked to the end of grant funding periods, evaluation, or FY close outs are duplicative and inefficient, making comparisons and year-over-year trends nearly impossible.

2. **Review and refine measures and metrics.** Findings from the third-party study suggested examining alternative approaches to determining the statutorily mandated measure for the degree of risk could potentially improve program participation. The inclusion of a requirement to have at least one psycho-social risk factor and at least a low risk for suicide to be eligible for participation in SSG Fox SPGP reduced the number of eligible individuals. Presently, the C-SSRS is used as one component of eligibility screening, in that it identifies individuals with suicidal thoughts and behaviors to determine the degree of suicide risk per § 201(q)(8)(B).

The baseline mental health screening per §201(q)(11)(A)(ii) does not currently involve the C-SSRS but consists of five screening tools identified in the NOFO to determine pre and post service mental health status, well-being, social support, financial stability, and suicide risk. The C-SSRS could still be required as a necessary part of suicide risk detection and suicide prevention service delivery, just separated from eligibility. If the C-SSRS was no longer used for eligibility determination, an alternate process would need to be defined to avoid the only criteria for suicide prevention services being military status and one psychosocial risk factor, as these alone would be a low bar to entry and dilute the program's focus

on suicide prevention. An analysis of alternative and available measures the Department can use to support an expanded view of suicide risk assessment and related measures and metrics is warranted.

3. **Alternate Approaches to Community Capacity Building.** Developing grantee evaluation capacity for continuous program improvement could help VA build an evidence base for upstream suicide prevention programs more quickly. The SSG Fox SPGP evaluation efforts primarily focus on assessing the effectiveness of grantee service delivery rather than on capacity-building for measuring and assessing progress and impact. The Centers for Disease Control and Prevention's (CDC) Veteran Suicide Prevention Evaluation (VSPE) Program emphasizes building grantees' own capacity for continuous program improvement. This contrasts with the SSG Fox SPGP's approach of compiling and interpreting data collectively. Given the low base rate of suicide and the limitations on the amount of funding and program reach thus far, the SSG Fox SPGP could offer tiered funding models, such as a community education and capacity building track and an individual service delivery track. As an initial step, VA plans to support program expansion by engaging in ongoing capacity assessment in coordination with VA Office of Suicide Prevention (OSP) strategic planning processes to fully integrate the SSG Fox SPGP into VA's public health approach for suicide prevention.

Conclusion

As of March 31, 2025, grantees have completed over 51,401 outreach contacts and directly served 10,581 participants. An additional 1,749 individuals were in the process of onboarding at the time of this report's data pull.

"The SSG Fox SPGP has had a significant impact on Veterans' lives. The positive changes in clients' lives and reduction in suicide risk underscore the value of continued support and funding. The collaboration with VA through SSG Fox SPGP has enabled us to expand services, enhance intake screenings, and increase staffing, which are essential steps in providing specialized care for Veterans and their families. This partnership and the shared vision of a suicide-free world for Veterans reflect a commitment to improving wellness and quality of life, making the program an invaluable resource for those it serves."

– SSG Fox SPGP Grantee

The SSG Fox SPGP is uniquely positioned to help tailor resources to meet the needs of Veterans in their communities, while enhancing partnerships and building community capacity to deliver suicide prevention services. The program's strength lies in allowing different approaches to be customized to each community's needs to reach individuals at risk of suicide. SSG Fox SPGP facilitates engagement with VA benefits and healthcare, and provides an alternative means of suicide risk reduction for those who may choose not to engage with VA.

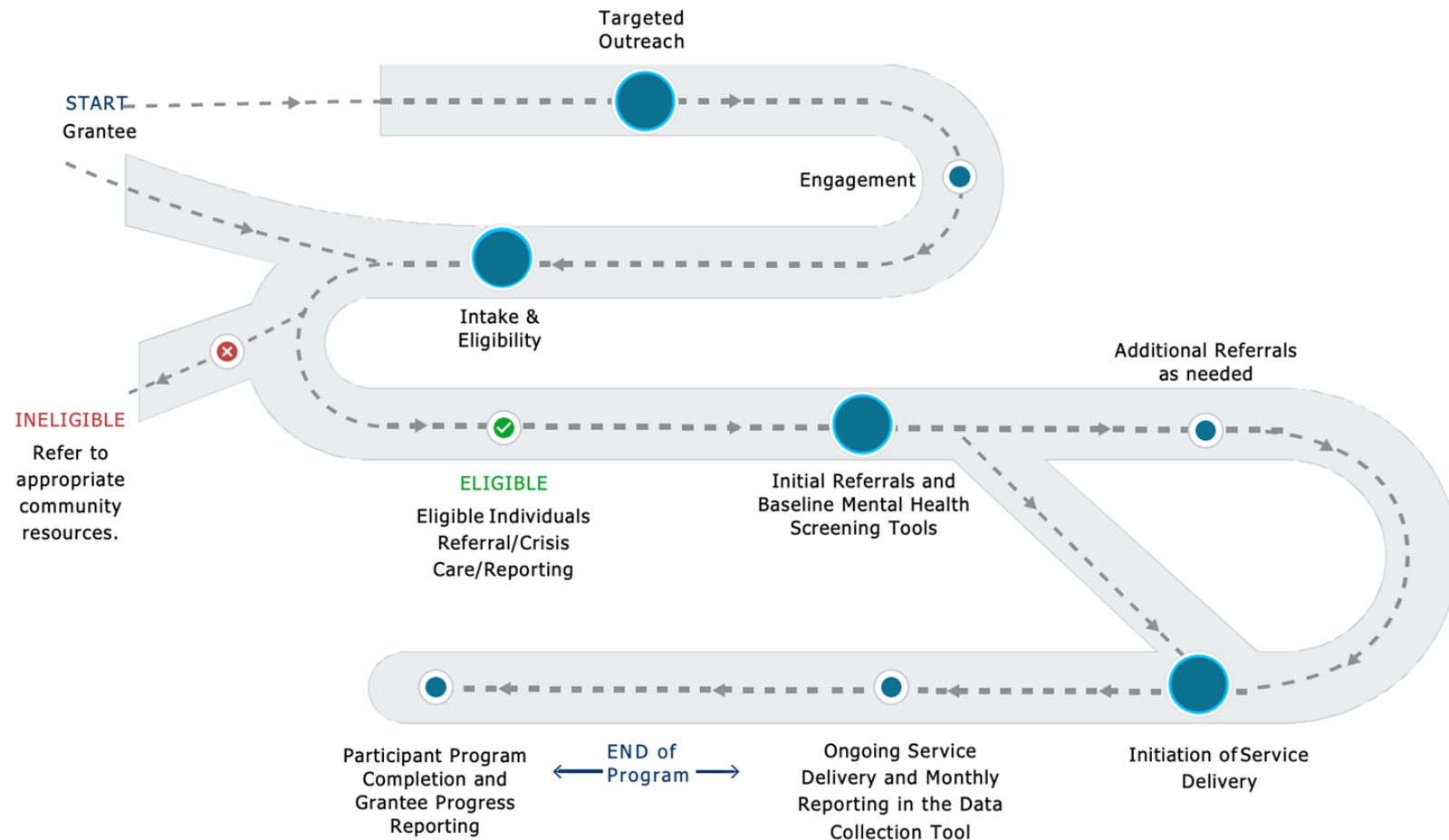
The SSG Fox SPGP embodies VA's public health approach in that it moves away from a belief that suicide is solely a mental health problem and moves toward engaging Veterans within and outside of clinical health care delivery systems, to decrease both individual and societal risk factors for suicide. Through the SSG Fox SPGP and a myriad of interconnected efforts, VA remains committed to ensuring that all the Nation's Veterans have the opportunity to not just live, but flourish in their families and communities.

Department of Veterans Affairs
August 2025

Appendix 1-Acronyms

Acronym	Name
CDC	Centers for Disease Control and Prevention
CFR	Code of Federal Regulations
C-SSRS	Columbia-Suicide Severity Rating Scale
FTE	Full Time Equivalent
FY	Fiscal Year
GAO	Government Accountability Office
GS	General Schedule
GSE	Generalized Self-Efficacy
HHS	U.S. Department of Health and Human Services
HPO	VA Homeless Programs Office
ISEL-12	Interpersonal Support Evaluation List
MOU	Memorandum of Understanding
NOFO	Notice of Funding Opportunity
OBO	VA Office of Business Oversight
OSP	VA Office of Suicide Prevention
OTH	Other Than Honorable
PHQ-9	Patient Health Questionnaire-9
P.L.	Public Law
RE-AIM	Reach, Effectiveness, Adoption, Implementation, and Maintenance
SLA	Service Level Agreement
SES	Socio-Economic Status
SME	Subject Matter Expert
SPAN	Suicide Prevention Application Network
SSG Fox SPGP	Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program
VA	U.S. Department of Veterans Affairs
VBA	Veterans Benefits Administration
VHA	Veterans Health Administration
VSPE	Veteran Suicide Prevention Evaluation
WEMWBS	Warwick-Edinburgh Mental Well-being Scale

Appendix 2-Grantee Journey Map



Note: This model was produced by The MITRE Corporation in 2022 and updated in December 2024.

Appendix 3-Detailed Description of Instruments

Suicide Risk Domain

Suicide risk is determined by administering the C-SSRS, a well validated²² six-item, non-clinical screening tool for a recent history of suicidal thoughts and behavior also used in VHA. Two of the six items are related to past month death wishes or wishes to go to sleep and not wake up and any actual thoughts of killing themselves. Other items inquire about suicidal intent and behaviors. Response options include no and yes with higher scores indicting higher risk for suicidal behaviors. A “Yes” response to items 1 and 2 indicates low risk, “Yes” to 3 and 6 moderate risk, and a “Yes” to 4, 5, and 6 indicate high risk.

Mental Health Status Domain

Mood related symptoms are measured using the PHQ-9, a well validated, nine item scale that measures depressive symptoms (Kroenke et al., 2001). Respondents report the presence of each symptom within the last 2 weeks, with response options ranging from 0 = Not at all to 3 = Nearly every day. Total scores ranged from 0 to 27, with cuts offs established for 1–4 minimal depression, 5–9 mild depression, 10–14 moderate depression, 15–19 moderately severe depression, 20–27 severe depression. Higher scores indicate more symptoms of depression. Published time estimates are between 5–10 min to administer.

Financial Stability Domain

Social Economic Status is measured using a variety of sociodemographic characteristics and questions related to the topics of employment, education, and finances to determine financial stability. Financial stress items were obtained from the CDC.²³ In addition to a range of demographic questions related to age, race, ethnicity, questions related to service in the Armed Forces are queried. A four item Traumatic Brain Injury Screen²⁴ (Brenner, et. al., 2013) is included to assess history of head or neck injuries and concussions. General health care information on enrollment in VA care and type of insurance as well as two items related to overall subject health and mental health were obtained from the VA national Survey of Veterans Questionnaire Instruments.²⁵

²² The Columbia Suicide Severity Rating Scale (C-SSRS): Psychometric Evidence (2016). The Columbia Lighthouse Project. https://cssrs.columbia.edu/wp-content/uploads/CSSRS_Supporting-Evidence_Book_2022.pdf

²³ Stone, D.M., Holland, K.M., Bartholow, B., Crosby, A.E., Davis, S., and Wilkins, N. (2017). *Preventing Suicide: A Technical Package of Policies, Programs, and Practices*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. https://stacks.cdc.gov/view/cdc/44275/cdc_44275_DS1.pdf

²⁴ Brenner, L. A., Homaifar, B. Y., Olson-Madden, J. H., Nagamoto, H. T., Huggins, J., Schneider, A. L., Forster, J. E., Matarazzo, B., & Corrigan, J. D. (2013). Prevalence and screening of traumatic brain injury among veterans seeking mental health services. *The Journal of head trauma rehabilitation*, 28(1), 21–30. <https://doi.org/10.1097/HTR.0b013e31827df0b5>

²⁵ U.S. Department of Veterans Affairs. (2010). *National Survey of Veterans* (Appendix A: Questionnaire Instruments). <https://www.va.gov/vetdata/docs/SurveysAndStudies/AppendixAQuestionnaires.pdf>

Well-being Domain Mental well-being measured using the WEMWBS (Tennant, et al, 2007), a 14-item scale for mental well-being covering subjective well-being, and psychological functioning. The WEMWBS words all items positively and addresses aspects of positive mental health such as positive states of being, thinking, behaving and feeling. While there is a short version with seven items, the 14-item version has been used more extensively as a pre and post intervention measure. Responses are scored 1= None of the time, 2= Rarely, 3= Some of the time, 4= Often, 5= All of the time; summed scores range from 14-70. Population scores on WEMWBS approximate to a normal distribution with no ceiling or floor effects, making the scale suitable as a tool for monitoring mental well-being at a population level. The scale is not designed to identify individuals with exceptionally high or low positive mental health, so no 'cut off' has been developed.

Self-efficacy is measured using the GSE (Schwarzer and Jerusalem, 1995), a 10-item scale that measures self-efficacy related to minor daily stressors and major life events. Responses are scored 1= Not at all true, 2= Hardly true, 3= Moderately true, and 4= Exactly true; summed scores range from 10 to 40. Higher scores indicate stronger perceived self-efficacy. Published time estimates are four minutes to administer.

Social Support Domain

Social support is measured with the ISEL-12 (Cohen et al., 1985), a 12-item scale that measures three dimensions of perceived social support: 1.) Appraisal Support-Items 2, 4, 6, and 11; 2.) Belonging Support-Items 1, 5, 7, and 9; and 3.) Tangible Support – Items, 3, 8, 10, and 12. Each dimension is measured by four items on a 4-point scale ranging from “Definitely true” to “Definitely false.” Responses are scored as 1= Definitely false, 2= Probably false, 3= Probably true, and 4= Definitely true; summed scores range from 12 to 48. Items 1, 2, 7, 8, 11, 12 are reverse scored. Higher scores indicate a higher degree of perceived availability of social support.

Appendix 4-Eligibility Determination

Eligible individuals as defined in § 201(q)(4) include (1) a person at risk of suicide who, in general, (2) served in the active military, naval, or air service and was discharged therefrom under conditions other than dishonorable as described in 38 U.S.C. § 101(2), former Service members with OTH status described in 38 U.S.C. § 1720l(b), or those who served on active duty in circumstances described in 38 U.S.C. §§ 1712A(a)(1)(C)(i)-(iv), which include a theater of combat operations. The individual is deemed “eligible” when both conditions (1) and (2) are met.

Programmatically, eligibility for the SSG Fox SPGP is established as a process of eligibility determination conducted by the grantees in collaboration with prospective individuals that includes screening for 1) psychosocial unmet needs, 2) verifying eligible individual status, and 3) detecting suicide risk. All three aspects must be met to be eligible.

1. Psychosocial Need for Suicide Prevention Services

Eligibility determination for the SSG Fox SPGP involves a set of questions focusing on the current need for suicide prevention services. This is determined by the presence of at least one of 15 suicide risk factors including psychosocial needs that increase the risk for suicidal ideation or behaviors with response options of yes and no. Individuals who score greater than zero are considered eligible on this aspect, where as a score of zero is ineligible, meaning there is not a current psychosocial need to be met by the delivery of SSG Fox SPGP services.

2. Eligible Individual Status

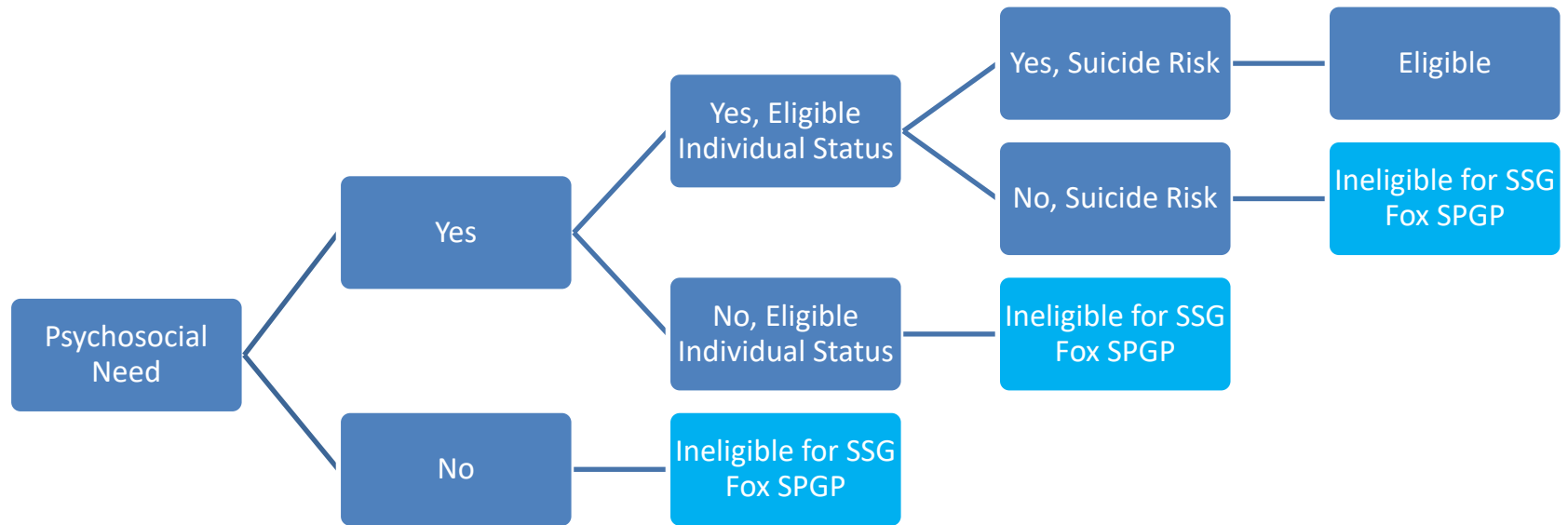
In addition to the Veterans or Service members specified in § 201(q)(4), the statute also extended the authority of the program to include family members, defined in § 201(q)(5) as a parent, spouse, child, sibling, stepfamily member, extended family member, and any other individual who lives with the eligible individual. Collectively, the term participant means an eligible individual or their family who is receiving suicide prevention services for which they are eligible from a grantee.

3. Suicide Risk

Suicide risk is detected by administering the C-SSRS, with a score of at least low risk being necessary for eligibility for the SSG Fox SPGP. See Appendix 3 for details on this tool. If an individual screens high risk, they are referred for immediate crisis intervention and further clinical assessment, but once stabilized, may continue with SSG Fox SPGP services. Individuals screening high risk for suicide, who decline a referral to emergency treatment, may continue to participate in the program. Grantees make continued attempts, when indicated, to refer for clinical services and/or emergency treatment.

If all three of the elements noted above are not present, the individual is considered ineligible. Ineligible individuals are referred to other programs and services and could also be rescreened for SSG Fox SPGP in the future should risk change. The eligibility determination flow is outlined in Figure 1.

Figure 1: Eligibility Determination and Participant Flow for SSG Fox SPGP



Appendix 5-Grant Recipients, Grant Amounts and Budgeted Operating Costs

Table 1. List of Grant Recipients, their Grant Award and Budgeted Operating Costs for FY 2023-25 Services. Awards totaled \$157,500,000 with the average award being \$615,324 (range: \$100,000-\$750,000).

Year 1: FY 2023 (Award announced September 19, 2022).

Year 2: FY 2024 (Award announced September 20, 2023).

Year 3: FY 2025 (Award announced September 12, 2024). Two organizations forfeited their Year 3 awards before beginning operations.

Organization Legal Name	TOTAL Award Amount	Executive Costs	Overhead Costs	Indirect Costs	Years Awarded
Adaptive Performance Center	\$2,250,000	\$1,736,614	\$499,396	\$13,990	1,2,3
Aleutian Pribilof Islands Association, Inc.	\$1,875,000	\$858,943	\$710,252	\$305,805	1,2,3
Alliance, Inc.	\$2,203,380	\$1,382,204	\$351,841	\$469,335	1,2,3
American Samoa Government	\$2,250,000	\$804,124	\$1,280,501	\$165,375	1,2,3
Americas Warrior Partnership Inc.	\$2,250,000	\$1,942,975	\$153,220	\$153,805	1,2,3
Arizona Department of Veterans' Services	\$2,250,000	\$1,796,917	\$269,261	\$183,822	1,2,3
Asheville Buncombe Community Christian Ministry, Inc.	\$2,250,000	\$1,662,110	\$393,923	\$193,967	1,2,3
Aspire Health Partners	\$1,140,000	\$840,257	\$122,779	\$176,964	1,2
Black Veterans for Social Justice, Inc.	\$2,250,000	\$1,502,546	\$608,519	\$138,935	1,2,3
Blue Star Families Inc	\$2,250,000	\$767,958	\$1,277,496	\$204,546	1,2,3
Bluebonnet Trails Community MHMR Center	\$650,000	\$544,927	\$36,892	\$68,181	1
Boulder Crest Foundation	\$2,172,776	\$1,465,420	\$525,704	\$81,652	1,2,3
Catholic Charities Hawaii	\$1,500,000	\$992,371	\$357,629	\$150,000	1,2
Center for Veterans Issues, Ltd.	\$2,250,000	\$1,170,200	\$629,800	\$450,000	1,2,3
Central Nebraska Community Action Partnership, Inc.	\$1,807,738	\$1,115,711	\$517,920	\$174,107	1,2,3
Cherokee Nation	\$2,250,001	\$1,093,547	\$984,136	\$172,318	1,2,3
Cheyenne and Arapaho Tribes of Oklahoma	\$452,360	\$227,169	\$159,201	\$65,990	3
Chicanos Por La Causa Inc	\$735,978	\$546,023	\$121,773	\$68,182	3

Organization Legal Name	TOTAL Award Amount	Executive Costs	Overhead Costs	Indirect Costs	Years Awarded
Child and Family Service	\$2,250,000	\$1,273,833	\$560,374	\$415,793	1,2,3
Choctaw Nation of Oklahoma	\$2,234,804	\$1,131,818	\$834,443	\$268,543	1,2,3
Clear Path For Veterans Inc	\$730,000	\$492,355	\$157,645	\$80,000	3
Community Action Program Corporation of Washington-Morgan Counties, Ohio	\$1,385,000	\$1,053,130	\$186,870	\$145,000	1,2
Community Building Art Works	\$299,996	\$215,475	\$81,521	\$3,000	1,2,3
Community Hope, Inc.	\$2,248,179	\$1,654,309	\$404,018	\$189,852	1,2,3
Community Service Council of Greater Tulsa, Inc.	\$2,250,000	\$1,155,000	\$945,000	\$150,000	1,2,3
Council on Substance Abuse-NCADD	\$2,250,000	\$1,322,049	\$591,896	\$336,055	1,2,3
County of Oneida	\$1,852,961	\$1,258,692	\$431,491	\$162,778	1,2,3
County of Santa Clara	\$551,358	\$314,537	\$197,625	\$39,196	3
Easterseals Capital Region & Eastern Connecticut Inc	\$462,469	\$341,719	\$78,708	\$42,043	3
Every Mind, Inc.	\$1,623,414	\$1,249,650	\$141,991	\$231,773	1,2,3
Family Endeavors, Inc.	\$750,000	\$618,134	\$ 63,684	\$68,182	3
Georgia Department of Veterans Service	\$2,217,675	\$1,147,481	\$610,507	\$459,687	1,2,3
Got Your Six Seven one	\$1,497,600	\$793,500	\$704,100	\$0-	2,3
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	\$1,950,000	\$1,125,169	\$558,583	\$266,248	1,2,3
Harbor Homes, Inc.	\$2,250,000	\$1,598,325	\$362,029	\$289,646	1,2,3
Harris County Texas Veterans Services Department	\$2,250,000	\$1,802,139	\$428,720	\$19,141	1,2,3
Healing Warriors Program	\$1,432,374	\$916,629	\$515,745	\$0-	1,2,3
Highland Rivers Community Service Board	\$1,499,862	\$1,005,653	\$403,430	\$90,779	1,2
Homeward Bound USA Inc. Adirondacks	\$2,250,000	\$1,169,757	\$958,143	\$122,100	1,2,3
Hope Center, Inc.	\$2,250,000	\$990,302	\$1,049,698	\$210,000	1,2,3
Illinois Joining Forces Foundation	\$1,695,428	\$934,776	\$686,920	\$73,732	1,2,3
Legal Aid Society Inc.	\$402,409	\$271,075	\$91,119	\$40,215	1,2
Lubbock Regional MHMR Center dba StarCare Specialty Health System	\$716,695	\$320,736	\$222,916	\$173,044	3-forfeited

Organization Legal Name	TOTAL Award Amount	Executive Costs	Overhead Costs	Indirect Costs	Years Awarded
Maine Dept of Defense Veterans and Emergency Management	\$1,500,000	\$385,098	\$1,028,755	\$86,147	1,2
Mental Health America of Dutchess County Inc	\$1,785,948	\$1,014,897	\$608,733	\$162,318	1,2,3
Michigan Department of Military and Veterans Affairs	\$2,250,000	\$708,854	\$1,541,146	\$0	1,2,3
Modern Military Association of America, Inc.	\$669,800	\$595,123	\$45,885	\$28,792	3
Montachusett Veterans Outreach Center, Inc	\$732,158	\$475,036	\$233,894	\$23,228	2,3
Nation's Finest	\$2,191,940	\$1,814,710	\$157,800	\$219,430	1,2,3
National Community Health Partners	\$2,250,000	\$1,489,803	\$631,035	\$129,162	1,2,3
Nine Line Veteran Services	\$1,863,162	\$1,146,859	\$519,437	\$196,866	1,2,3
Northwest Florida Comprehensive Services for Children Inc.	\$2,250,000	\$1,643,666	\$402,330	\$204,004	1,2,3
Operation Stand Down Tennessee	\$2,238,600	\$1,514,662	\$503,696	\$220,242	1,2,3
Paws and Stripes (P&S)	\$1,916,678	\$1,433,628	\$219,800	\$263,250	1,2,3
Penn Foundation Inc.	\$1,282,424	\$649,031	\$513,191	\$120,202	1,2
Permission to Start Dreaming Foundation	\$2,250,000	\$1,580,576	\$660,635	\$8,789	1,2,3
Reboot Recovery	\$691,100	\$507,348	\$128,594	\$55,158	1,2,3
Rhode Island Department of Health	\$2,077,203	\$184,181	\$1,689,322	\$203,700	1,2,3
Rowan University School of Osteopathic Medicine	\$1,875,374	\$957,557	\$599,767	\$318,050	1,2,3
Sabine Valley Regional Mental Health Mental Retardation Center	\$585,004	\$312,855	\$241,351	\$30,798	1,2,3
Society of St. Vincent de Paul South Pinellas, Inc.	\$2,250,000	\$1,428,704	\$596,296	\$225,000	1,2,3
South Carolina Department of Veterans Affairs	\$246,775	\$134,542	\$112,233	\$0	1
Southern Alabama AHEC	\$1,107,215	\$196,433	\$891,730	\$19,052	1,3
Start Corporation	\$2,250,000	\$1,522,081	\$544,998	\$182,921	1,2,3
Swords To Plowshares Veterans Rights Organization	\$2,250,000	\$1,461,795	\$538,206	\$249,999	1,2,3
Transitional Living Services	\$634,022	\$261,052	\$309,970	\$63,000	3
United States Veterans Initiative (DC)	\$1,200,000	\$670,669	\$399,960	\$129,371	1,2,3
United States Veterans Initiative (NV)	\$485,371	\$350,224	\$72,661	\$62,486	1,2,3

Organization Legal Name	TOTAL Award Amount	Executive Costs	Overhead Costs	Indirect Costs	Years Awarded
Upstate Warrior Solution, Inc.	\$2,177,400	\$1,226,811	\$717,165	\$233,424	1,2,3
US Vets-Arizona	\$1,400,000	\$608,035	\$642,845	\$149,120	1,2,3
US Vets-Texas	\$750,000	\$505,136	\$145,084	\$99,780	2,3
Valley-Wide Health Systems* (Southeast Mental Health Services)	\$495,513	\$305,692	\$144,774	\$45,047	1,2,3
Veteran Rites Inc	\$344,822	\$227,172	\$102,000	\$15,650	3
Veteran Social Services Inc	\$441,006	\$232,352	\$186,178	\$22,477	3
Veterans Bridge Home Inc.	\$2,250,000	\$2,054,840	\$181,338	\$13,822	1,2,3
Veterans Community Project	\$1,497,326	\$1,208,423	\$141,403	\$147,500	1,2
Veterans Inc.	\$2,250,000	\$1,704,918	\$320,082	\$225,000	1,2,3
Veterans Leadership Program of Western Pennsylvania, Inc.	\$2,250,000	\$1,640,050	\$435,251	\$174,699	1,2,3
Veterans Multi-Service Center, Inc.	\$2,220,633	\$1,399,177	\$599,393	\$222,063	1,2,3
Veterans One-stop Center of WNY, Inc.	\$2,250,000	\$1,739,132	\$352,801	\$158,067	1,2,3
Veterans Outreach of Wisconsin	\$1,521,707	\$362,919	\$1,117,406	\$41,383	1,2,3
Volunteers of America Chesapeake	\$2,050,000	\$1,567,525	\$218,833	\$263,642	1,2,3
Volunteers of America Mid-States, Inc.	\$2,175,000	\$1,366,678	\$583,322	\$225,000	1,2,3
Volunteers of America of Greater Ohio, Inc.	\$2,250,000	\$1,629,585	\$304,547	\$315,868	1,2,3
Volunteers of America of Illinois	\$1,958,805	\$1,294,877	\$320,636	\$343,292	1,2,3
Volunteers of America of Michigan, Inc.	\$2,072,304	\$1,602,340	\$229,393	\$240,571	1,2,3
Volunteers of America, Northern Rockies	\$2,250,000	\$1,269,412	\$755,588	\$225,000	1,2,3
War Horses for Veterans, Inc.	\$984,896	\$399,564	\$524,332	\$61,000	1,2,3- forfeited
Washington State Department of Veterans Affairs	\$2,250,000	\$1,167,928	\$800,100	\$281,972	1,2,3
WestCare California, Inc.	\$2,250,000	\$1,287,747	\$624,753	\$337,500	1,2,3
WestCare Kentucky Inc.	\$1,538,633	\$961,700	\$270,370	\$306,563	1,2,3
WestCare Oregon, Inc.	\$2,250,000	\$1,281,399	\$523,518	\$445,083	1,2,3
WestCare Tennessee Inc.	\$2,250,000	\$1,411,435	\$397,459	\$441,107	1,2,3

Organization Legal Name	TOTAL Award Amount	Executive Costs	Overhead Costs	Indirect Costs	Years Awarded
Western Tidewater Community Services Board	\$2,079,484	\$1,740,693	\$150,682	\$188,108	1,2,3
Zero8hundred Inc	\$372,241	\$239,600	\$82,762	\$49,879	3

*= grantees who have changed their legal name at any time during award period.

Table 2. A list of the grant recipients with partner organizations that delivered services funded by the grant and the amount of such grant received by the partner organization (§ 201(k)(1)(B)(ii)).

Grant Recipient Organization Legal Name	Partner Organization(s)	TOTAL
Arizona Department of Veterans' Services	Arizona Coalition of Military Families	\$923,339
County of Oneida	Neighborhood Center	\$413,413
	Utica Center for Development	\$1,243,299
Georgia Department of Veteran Services	Kennisaw State University	\$1,300,271
Maine Dept of Defense Veterans and Emergency Management	Health Affiliates Maine	\$993,856
	Maine Medical Association	\$275,805
	University of Maine	\$1,291,535
Rhode Island Department of Health	Newport Mental Health	\$494,146
	Family Services Center	\$508,121
South Carolina Department of Veterans Affairs	Vantage Point Foundation	\$277,696

Note: Partner organization is defined as an entity in receipt of Federal financial assistance via a pass-through entity as defined in 38 CFR 50.1(d) to provide or carry out a service such as by contract, grant, or cooperative agreement. The only SSG Fox SPGP grantees eligible to operate as a pass-through entity are state, local or tribal government organizations.

Appendix 6-Participant Demographic Characteristics Disaggregated by Grant Recipient

Disaggregated Data on Participants (Eligible Individuals and Family Members) is organized by alphabetical listing of all grant recipients ever awarded and with data collected from September 19, 2022 – March 31, 2025. Data are displayed in tables organized under descriptive headings labeled from a-j to correspond to legislative requirements

a. Participant Self-Identified Sex (§ 201(k)(1)(B)(iii)(I))

Organization Legal Name	Female	Male	Other / Declined	Total
Adaptive Performance Center	29	106	1	136
Aleutian Pribilof Islands Association, Inc.	15	15	0	30
Alliance, Inc.	71	186	0	257
American Samoa Government	20	89	0	109
Americas Warrior Partnership Inc	18	38	0	56
Arizona Department of Veterans' Services	80	236	0	316
Asheville Buncombe Community Christian Ministry, Inc.	35	113	0	148
Aspire Health Partners	6	22	0	28
Black Veterans for Social Justice, Inc.	49	210	2	261
Blue Star Families	34	13	0	47
Bluebonnet Trails Community MHMR Center	21	31	0	52
Boulder Crest Foundation	46	186	0	232
Catholic Charities Hawaii	8	51	0	59
Center for Veterans Issues, Ltd.	33	67	0	100
Central Nebraska Community Action Partnership, Inc.	18	89	0	107
Cherokee Nation	29	82	0	111
Cheyenne and Arapaho Tribes of Oklahoma	0	1	0	1
Chicanos Por La Causa, Inc.	9	33	0	42
Child and Family Service	42	102	0	144
Choctaw Nation of Oklahoma	42	88	2	132
Clear Path For Veterans, Inc.	1	3	0	4

Organization Legal Name	Female	Male	Other / Declined	Total
Community Action Program Corporation of Washington-Morgan Counties, Ohio	3	23	0	26
Community Building Art Works	21	1	0	22
Community Hope, Inc.	15	33	0	48
Community Service Council of Greater Tulsa, Inc.	12	38	0	50
Council on Substance Abuse-NCADD	14	49	0	63
County of Oneida	5	15	0	20
County of Santa Clara	0	0	0	0
Easterseals Capital Region & Eastern Connecticut, Inc.	0	11	0	11
EveryMind, Inc.	28	78	0	106
Family Endeavors, Inc.	6	26	0	32
Georgia Department of Veterans Service	29	73	1	103
Got Your Six Seven One	8	23	0	31
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	8	22	0	30
Harbor Homes, Inc.	19	100	4	123
Harris County Texas Veterans Services Department	24	140	4	168
Healing Warriors Program	58	155	3	216
Highland Rivers Community Service Board	9	54	0	63
Homeward Bound USA Inc. Adirondacks	24	47	0	71
Hope Center, Inc.	3	4	0	7
Illinois Joining Forces Foundation	17	48	0	65
Legal Aid Society Inc.	0	6	1	7
Maine Dept of Defense Veterans and Emergency Management	16	72	2	90
Mental Health America of Dutchess County Inc.	42	143	2	187
Michigan Department of Military and Veterans Affairs	6	18	0	24
Modern Military Association of America, Inc.	2	1	0	3
Montachusett Veterans Outreach Center, Inc.	24	59	0	83
National Community Health Partners	23	74	0	97
Nation's Finest	20	135	1	156

Organization Legal Name	Female	Male	Other / Declined	Total
NineLine Veteran Services	17	64	0	81
Northwest Florida Comprehensive Services for Children Inc.	136	442	1	579
Operation Stand Down Tennessee	40	146	0	186
Paws and Stripes (P&S)	48	66	2	116
Penn Foundation Inc.	14	49	0	63
Permission to Start Dreaming Foundation	69	128	1	198
Reboot Recovery	24	29	0	53
Rhode Island Department of Health	8	19	0	27
Rowan University School of Osteopathic Medicine	3	20	0	23
Sabine Valley Regional Mental Health Mental Retardation Center	11	44	0	55
Society of St. Vincent de Paul South Pinellas, Inc.	41	171	0	212
South Carolina Department of Veterans Affairs	1	6	0	7
Southern Alabama AHEC	13	42	0	55
Start Corporation	11	75	0	86
Swords To Plowshares Veterans Rights Organization	7	41	2	50
Transitional Living Services	2	15	0	17
United States Veterans Initiative-DC	8	40	0	48
United States Veterans Initiative – NV	17	128	0	145
Upstate Warrior Solution	95	341	1	437
US Vets – Arizona	20	182	0	202
US Vets-Texas	18	108	0	126
Valley-Wide Health Systems* (Southeast Mental Health Services)	2	6	0	8
Veteran Rites, Inc.	15	12	0	27
Veteran Social Services, Inc.	0	0	0	0
Veterans Bridge Home	288	557	6	851
Veterans Community Project	31	94	0	125
Veterans Inc.	34	129	5	168
Veterans Leadership Program of Western Pennsylvania, Inc.	13	42	0	55
Veterans Multi-Service Center, Inc.	34	166	0	200

Organization Legal Name	Female	Male	Other / Declined	Total
Veterans One-Stop Center of WNY, Inc.	17	79	0	96
Veterans Outreach of Wisconsin	2	11	0	13
Volunteers of America Chesapeake	28	74	0	102
Volunteers of America Mid-States, Inc.	26	87	0	113
Volunteers of America of Greater Ohio, Inc.	5	39	0	44
Volunteers of America of Illinois	12	96	0	108
Volunteers of America of Michigan, Inc.	22	122	0	144
Volunteers of America, Northern Rockies	63	189	1	253
War Horses for Veterans, Inc.	2	23	0	25
Washington State Department of Veterans Affairs	7	54	0	61
West Care California, Inc.	21	96	0	117
West Care Kentucky Inc.	16	244	0	260
West Care Oregon, Inc.	11	108	0	119
West Care Tennessee Inc.	13	55	0	68
Western Tidewater Community Services Board	38	96	0	134
Zero8Hundred, Inc.	1	4	0	5
Grand Total	2346	7748	42	10136

*= grantees who have changed their legal name at any time during award period.

Other includes a response of "other" and "prefer not to respond." The count of missing/did not respond: 445

b. Participant Marital Status (§ 201(k)(1)(B)(iii)(I))

Organization Legal Name	Divorced	Married or Domestic Partner	Never Married	Previously Married And Separated	Single	Widow / Widower	Total
Adaptive Performance Center	32	67	4	7	21	5	136
Aleutian Pribilof Islands Association, Inc.	7	14	3	1	4	1	30
Alliance, Inc.	33	36	4	11	169	4	257

Organization Legal Name	Divorced	Married or Domestic Partner	Never Married	Previously Married And Separated	Single	Widow / Widower	Total
American Samoa Government	10	82	0	5	6	6	109
Americas Warrior Partnership Inc.	11	19	0	3	23	0	56
Arizona Department of Veterans' Services	111	83	8	13	85	16	316
Asheville Buncombe Community Christian Ministry, Inc.	38	27	6	13	59	5	148
Aspire Health Partners	1	15	1	3	8	0	28
Black Veterans for Social Justice, Inc.	49	48	6	19	126	13	261
Blue Star Families	4	39	1	0	1	2	47
Bluebonnet Trails Community MHMR Center	9	30	0	2	9	2	52
Boulder Crest Foundation	56	141	23	8	0	4	232
Catholic Charities Hawaii	24	8	6	3	14	4	59
Center for Veterans Issues, Ltd.	27	13	1	4	53	2	100
Central Nebraska Community Action Partnership, Inc.	29	31	9	3	34	1	107
Cherokee Nation	29	40	4	8	22	8	111
Cheyenne and Arapaho Tribes of Oklahoma	0	1	0	0	0	0	1
Chicanos Por La Causa, Inc.	6	22	0	2	9	3	42
Child and Family Service	20	66	14	6	33	5	144
Choctaw Nation of Oklahoma	25	72	3	5	23	4	132
Clear Path For Veterans, Inc.	1	2	0	0	1	0	4
Community Action Program Corporation of Washington-Morgan Counties, Ohio	13	4	1	2	4	2	26
Community Building Art Works	4	10	1	2	4	1	22
Community Hope, Inc.	7	9	1	3	23	5	48
Community Service Council of Greater	17	10	1	2	17	3	50

Organization Legal Name	Divorced	Married or Domestic Partner	Never Married	Previously Married And Separated	Single	Widow / Widower	Total
Tulsa, Inc.							
Council on Substance Abuse-NCADD	21	18	6	1	14	3	63
County of Oneida	2	3	0	2	13	0	20
County of Santa Clara	0	0	0	0	0	0	0
Easterseals Capital Region & Eastern Connecticut, Inc.	3	4	2	0	1	1	11
Every Mind, Inc.	22	23	4	5	50	2	106
Family Endeavors, Inc.	6	16	1	0	6	3	32
Georgia Department of Veterans Service	13	52	5	10	19	4	103
Got Your Six Seven One	5	15	1	3	5	2	31
Great Plains Veterans Services* Center (Rocky Boy Veterans Center)	4	8	0	3	11	4	30
Harbor Homes, Inc.	47	24	5	6	32	9	123
Harris County Texas Veterans Services Department	52	31	4	10	68	3	168
Healing Warriors Program	53	104	4	2	48	5	216
Highland Rivers Community Service Board	21	14	1	6	16	5	63
Homeward Bound USA Inc. Adirondacks	28	25	0	5	10	3	71
Hope Center, Inc.	1	1	1	1	3	0	7
Illinois Joining Forces Foundation	20	9	4	5	25	2	65
Legal Aid Society Inc.	5	1	0	0	1	0	7
Maine Dept of Defense Veterans and Emergency Management	37	15	0	7	25	6	90
Mental Health America of Dutchess County Inc.	39	72	7	10	50	9	187
Michigan Department of Military and	4	10	1	2	6	1	24

Organization Legal Name	Divorced	Married or Domestic Partner	Never Married	Previously Married And Separated	Single	Widow / Widower	Total
Veterans Affairs							
Modern Military Association of America, Inc.	0	1	1	0	1	0	3
Montachusett Veterans Outreach Center, Inc.	24	21	1	5	29	3	83
National Community Health Partners	33	31	4	5	18	6	97
Nation's Finest	46	19	12	8	65	6	156
Nine Line Veteran Services	17	23	7	7	25	2	81
Northwest Florida Comprehensive Services for Children Inc.	203	89	37	76	141	33	579
Operation Stand Down Tennessee	24	52	4	7	93	6	186
Paws and Stripes (P&S)	22	59	5	0	26	4	116
Penn Foundation Inc.	16	25	1	3	11	7	63
Permission to Start Dreaming Foundation	40	108	19	18	10	3	198
Reboot Recovery	11	38	0	1	2	1	53
Rhode Island Department of Health	8	10	3	1	5	0	27
Rowan University School of Osteopathic Medicine	5	9	0	0	8	1	23
Sabine Valley Regional Mental Health Mental Retardation Center	18	22	0	6	7	2	55
Society of St. Vincent de Paul South Pinellas, Inc.	72	37	7	12	65	19	212
South Carolina Department of Veterans Affairs	2	1	1	1	1	1	7
Southern Alabama AHEC	10	39	1	1	2	2	55
Start Corporation	21	16	3	6	36	4	86
Swords To Plowshares Veterans Rights Organization	11	8	10	3	15	3	50

Organization Legal Name	Divorced	Married or Domestic Partner	Never Married	Previously Married And Separated	Single	Widow / Widower	Total
Transitional Living Services	4	6	0	1	5	1	17
United States Veterans Initiative-DC	14	4	1	5	21	3	48
United States Veterans Initiative-NV	35	12	1	10	80	7	145
Upstate Warrior Solution Inc.	83	168	0	25	148	13	437
US Vets-Arizona	54	18	3	11	107	8	201
US Vets-Texas	35	18	5	11	49	8	126
Valley-Wide Health Systems* (Southeast Mental Health Services)	3	3	1	0	1	0	8
Veteran Rites, Inc.	5	14	0	2	5	1	27
Veteran Social Services, Inc.	0	0	0	0	0	0	0
Veterans Bridge Home Inc.	150	230	2	97	347	25	851
Veterans Community Project	40	23	5	11	38	8	125
Veterans Inc.	47	40	10	11	58	2	168
Veterans Leadership Program of Western Pennsylvania, Inc.	22	6	5	9	11	2	55
Veterans Multi-Service Center, Inc.	42	19	12	20	99	8	200
Veterans One-stop Center of WNY, Inc.	30	22	4	8	28	4	96
Veterans Outreach of Wisconsin	4	2	0	1	4	2	13
Volunteers of America Chesapeake	38	12	2	8	38	4	102
Volunteers of America Mid-States, Inc.	36	22	6	8	34	7	113
Volunteers of America of Greater Ohio, Inc.	19	2	2	3	16	2	44
Volunteers of America of Illinois	28	8	1	9	61	1	108
Volunteers of America of Michigan, Inc.	45	17	5	8	62	7	144
Volunteers of America, Northern Rockies	97	91	7	5	44	9	253
War Horses for Veterans, Inc.	5	16	0	2	2	0	25

Organization Legal Name	Divorced	Married or Domestic Partner	Never Married	Previously Married And Separated	Single	Widow / Widower	Total
Washington State Department of Veterans Affairs	12	36	2	0	10	1	61
West Care California, Inc.	32	37	2	7	32	7	117
West Care Kentucky Inc.	70	98	4	12	55	21	260
West Care Oregon, Inc.	56	16	3	6	31	7	119
West Care Tennessee Inc	17	24	0	5	17	5	68
Western Tidewater Community Services Board	23	56	3	6	41	5	134
Zero8Hundred, Inc.	2	0	0	0	3	0	5
Grand Total	2577	2962	345	664	3158	429	10135

*= grantees who have changed their legal name at any time during award period.

The count of missing/did not respond: 446

c. Participant Age (§ 201(k)(1)(B)(iii)(I))

Organization Legal Name	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65 or older	Total
Adaptive Performance Center	2	13	30	29	21	41	136
Aleutian Pribilof Islands Association, Inc.	0	1	7	2	8	12	30
Alliance, Inc.	4	41	69	35	72	36	257
American Samoa Government	3	8	22	19	28	29	109
Americas Warrior Partnership Inc.	3	5	15	24	8	1	56
Arizona Department of Veterans' Services	12	36	68	51	73	76	316
Asheville Buncombe Community Christian Ministry, Inc.	4	32	32	36	28	16	148
Aspire Health Partners	8	4	9	5	2	0	28
Black Veterans for Social Justice, Inc.	11	37	49	32	85	47	261
Blue Star Families	0	3	17	15	12	0	47

Organization Legal Name	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65 or older	Total
Bluebonnet Trails Community MHMR Center	5	8	13	12	10	4	52
Boulder Crest Foundation	0	28	101	64	29	10	232
Catholic Charities Hawaii	2	9	9	8	17	14	59
Center for Veterans Issues, Ltd.	1	20	17	20	31	11	100
Central Nebraska Community Action Partnership, Inc.	4	14	31	19	28	11	107
Cherokee Nation	2	14	33	24	21	17	111
Cheyenne and Arapaho Tribes of Oklahoma	0	0	0	1	0	0	1
Chicanos Por La Causa, Inc.	1	3	8	10	8	12	42
Child and Family Service	11	40	43	24	9	17	144
Choctaw Nation of Oklahoma	5	22	38	31	17	19	132
Clear Path For Veterans, Inc.	0	1	1	0	1	1	4
Community Action Program Corporation of Washington-Morgan Counties, Ohio	1	2	6	9	4	4	26
Community Building Art Works	0	2	9	9	2	0	22
Community Hope, Inc.	3	5	15	11	7	7	48
Community Service Council of Greater Tulsa, Inc.	0	10	18	7	11	4	50
Council on Substance Abuse-NCADD	1	6	19	14	8	15	63
County of Oneida	1	7	2	2	6	2	20
County of Santa Clara	0	0	0	0	0	0	0
Easter seals Capital Region & Eastern Connecticut, Inc.	0	1	3	2	1	4	11
Every Mind, Inc.	3	17	32	27	22	5	106
Family Endeavors, Inc.	0	5	5	6	8	8	32
Georgia Department of Veterans Service	8	21	21	24	16	13	103
Got Your Six Seven One	1	7	4	11	6	2	31
Great Plains Veterans Service Center* (Rocky Boy Veterans Center)	2	1	5	5	8	9	30
Harbor Homes, Inc.	5	24	28	22	31	13	123

Organization Legal Name	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65 or older	Total
Harris County Texas Veterans Services Department	3	36	61	36	20	12	168
Healing Warriors Program	2	31	50	38	38	57	216
Highland Rivers Community Service Board	2	17	9	11	12	12	63
Homeward Bound USA Inc. Adirondacks	0	6	17	18	18	12	71
Hope Center, Inc.	0	1	1	2	2	1	7
Illinois Joining Forces Foundation	1	13	19	12	16	4	65
Legal Aid Society Inc.	0	0	2	1	2	2	7
Maine Dept of Defense Veterans and Emergency Management	2	5	11	22	27	23	90
Mental Health America of Dutchess County Inc.	2	20	34	25	50	56	187
Michigan Department of Military and Veterans Affairs	1	5	8	6	2	2	24
Modern Military Association of America, Inc.	0	1	0	1	1	0	3
Montachusett Veterans Outreach Center, Inc.	4	16	24	13	20	6	83
National Community Health Partners	7	12	22	18	18	20	97
Nation's Finest	3	29	30	25	33	36	156
Nine Line Veteran Services	10	15	33	8	10	5	81
Northwest Florida Comprehensive Services for Children Inc	13	92	127	89	169	89	579
Operation Stand Down Tennessee	14	53	36	31	27	25	186
Paws and Stripes (P&S)	3	18	30	31	19	15	116
Penn Foundation Inc.	2	2	9	9	16	25	63
Permission to Start Dreaming Foundation	0	21	83	70	20	4	198
Reboot Recovery	0	6	14	21	6	6	53
Rhode Island Department of Health	0	1	5	5	4	12	27
Rowan University School of Osteopathic Medicine	0	5	6	1	7	4	23
Sabine Valley Regional Mental Health Mental Retardation Center	4	8	11	20	8	4	55
Society of St. Vincent de Paul South Pinellas, Inc.	2	24	40	35	66	45	212

Organization Legal Name	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65 or older	Total
South Carolina Department of Veterans Affairs	0	1	2	1	3	0	7
Southern Alabama AHEC	0	3	2	7	20	23	55
Start Corporation	2	12	25	19	15	13	86
Swords To Plowshares Veterans Rights Organization	1	8	11	8	13	9	50
Transitional Living Services	0	7	4	1	1	4	17
United States Veterans Initiative-DC	2	10	5	3	14	14	48
United States Veterans Initiative-NV	2	12	28	36	39	28	145
Upstate Warrior Solution Inc.	14	78	113	82	78	72	437
US Vets-Arizona	2	22	37	37	62	42	202
US Vets-Texas	2	29	28	28	23	16	126
Valley-Wide Health Systems* (Southeast Mental Health Services)	0	2	2	2	1	1	8
Veteran Rites, Inc.	0	3	8	10	6	0	27
Veteran Social Services, Inc.	0	0	0	0	0	0	0
Veterans Bridge Home Inc.	23	187	233	163	156	89	851
Veterans Community Project	2	18	34	29	28	14	125
Veterans Inc.	8	31	45	31	39	14	168
Veterans Leadership Program of Western Pennsylvania, Inc.	2	6	12	9	20	6	55
Veterans Multi-Service Center, Inc.	7	18	35	43	64	33	200
Veterans One-stop Center of WNY, Inc.	0	13	22	17	26	18	96
Veterans Outreach of Wisconsin	1	5	1	0	4	2	13
Volunteers of America Chesapeake	4	10	25	20	27	16	102
Volunteers of America Mid-States, Inc.	0	15	29	28	30	11	113
Volunteers of America of Greater Ohio, Inc.	1	3	8	7	17	8	44
Volunteers of America of Illinois	3	13	16	13	40	23	108
Volunteers of America of Michigan, Inc.	1	12	25	18	59	29	144
Volunteers of America, Northern Rockies	5	30	70	58	54	36	253

Organization Legal Name	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65 or older	Total
War Horses for Veterans, Inc.	0	4	13	4	3	1	25
Washington State Department of Veterans Affairs	0	10	23	9	8	11	61
West Care California, Inc.	1	14	16	14	38	34	117
West Care Kentucky Inc.	4	24	57	39	51	85	260
West Care Oregon, Inc.	0	14	17	20	36	32	119
West Care Tennessee Inc	0	8	13	7	22	18	68
Western Tidewater Community Services Board	11	35	31	14	20	23	134
Zero8Hundred, Inc.	0	2	3	0	0	0	5
Grand Total	276	1543	2454	1935	2266	1662	10136

*= grantees who have changed their legal name at any time during award period.

The count of missing/did not respond: 445

d. Participant Race and Ethnicity (§ 201(k)(1)(B)(iii)(I))

Key

AN = Alaskan Native

AI = American Indian

A = Asian

B/AA = Black/African American

W/C = White/Caucasian

H/L = Hispanic/Latino

NH = Native Hawaiian

PI = Pacific Islander

2+ = Two or More Races and/or Ethnicities

O = Other and/or prefer not to answer

Organization Legal Name	AN	AI	A	B/AA	W/C	H/L	NH	PI	2+	O	Total
Adaptive Performance Center	0	3	1	4	116	1	1	0	4	6	136
Aleutian Pribilof Islands Association, Inc.	10	0	1	1	11	0	0	0	5	2	30
Alliance, Inc.	0	1	2	175	68	5	0	0	1	4	256
American Samoa Government	0	0	0	1	1	0	0	103	1	3	109
Americas Warrior Partnership Inc.	0	2	1	14	31	2	0	0	4	2	56
Arizona Department of Veterans'	0	11	3	47	181	33	0	1	28	12	316

Organization Legal Name	AN	AI	A	B/AA	W/C	H/L	NH	PI	2+	O	Total
Services											
Asheville Buncombe Community Christian Ministry, Inc.	0	2	1	35	94	0	0	0	4	12	148
Aspire Health Partners	0	1	0	4	19	2	0	0	1	1	28
Black Veterans for Social Justice, Inc.	0	2	2	179	10	30	0	0	30	6	259
Blue Star Families	0	0	3	6	32	3	0	0	0	3	47
Bluebonnet Trails Community MHMR Center	0	3	0	13	18	10	0	0	6	1	51
Boulder Crest Foundation	0	4	1	17	149	29	0	0	3	29	232
Catholic Charities Hawaii	0	2	10	15	19	3	5	2	2	1	59
Center for Veterans Issues, Ltd.	0	2	1	52	39	2	0	0	3	1	100
Central Nebraska Community Action Partnership, Inc.	0	1	0	13	79	4	0	0	8	2	107
Cherokee Nation	0	57	0	3	35	0	0	0	13	3	111
Cheyenne and Arapaho Tribes of Oklahoma	0	1	0	0	0	0	0	0	0	0	1
Chicanos Por La Causa, Inc.	0	0	0	0	5	35	0	1	1	0	42
Child and Family Service	0	2	21	19	40	9	8	3	34	8	144
Choctaw Nation of Oklahoma	0	78	0	1	15	1	0	0	31	5	131
Clear Path For Veterans, Inc.	0	0	0	0	4	0	0	0	0	0	4
Community Action Program Corporation of Washington-Morgan Counties, Ohio	0	0	0	1	23	0	0	0	1	1	26
Community Building Art Works	0	0	0	4	14	3	0	0	1	0	22
Community Hope, Inc.	0	0	0	19	12	13	0	0	0	4	48
Community Service Council of Greater Tulsa, Inc.	1	5	0	7	25	2	0	0	8	2	50
Council on Substance Abuse-NCADD	0	0	0	51	10	0	0	0	2	0	63

Organization Legal Name	AN	AI	A	B/AA	W/C	H/L	NH	PI	2+	O	Total
County of Oneida	0	0	0	0	18	1	0	0	1	0	20
County of Santa Clara	0	0	0	0	0	0	0	0	0	0	0
Easter seals Capital Region & Eastern Connecticut, Inc.	0	1	0	0	9	1	0	0	0	0	11
Every Mind, Inc.	0	0	2	59	34	4	0	0	3	4	106
Family Endeavors, Inc.	0	0	0	0	2	30	0	0	0	0	32
Georgia Department of Veterans Service	0	0	1	45	39	6	0	2	6	4	103
Got Your Six Seven One	0	0	1	1	2	1	0	20	4	2	31
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	1	25	0	0	3	0	0	0	1	0	30
Harbor Homes, Inc.	1	2	1	4	102	4	0	0	4	3	121
Harris County Texas Veterans Services Department	0	1	0	77	49	24	0	1	8	8	168
Healing Warriors Program	0	3	1	9	158	17	0	0	24	4	216
Highland Rivers Community Service Board	0	0	1	24	37	0	0	0	1	0	63
Homeward Bound USA Inc. Adirondacks	0	0	2	1	61	1	0	0	5	1	71
Hope Center, Inc.	0	0	0	5	2	0	0	0	0	0	7
Illinois Joining Forces Foundation	0	1	0	24	29	5	0	0	3	3	65
Legal Aid Society Inc.	0	0	0	0	7	0	0	0	0	0	7
Maine Dept of Defense Veterans and Emergency Management	0	0	1	3	85	0	0	0	0	1	90
Mental Health America of Dutchess County Inc.	0	0	4	29	131	14	0	0	6	3	187
Michigan Department of Military and Veterans Affairs	0	2	0	5	13	2	0	0	1	1	24
Modern Military Association of America, Inc.	0	0	0	0	2	0	0	0	1	0	3

Organization Legal Name	AN	AI	A	B/AA	W/C	H/L	NH	PI	2+	O	Total
Montachusett Veterans Outreach Center, Inc.	0	0	1	3	71	5	0	0	0	3	83
National Community Health Partners	0	0	1	8	41	30	0	0	6	11	97
Nation's Finest	0	2	2	26	87	18	0	2	8	11	156
NineLine Veteran Services	1	3	1	14	42	5	2	0	12	1	81
Northwest Florida Comprehensive Services for Children Inc.	0	2	0	283	267	12	0	2	11	2	579
Operation Stand Down Tennessee	0	3	2	56	100	5	1	0	12	6	185
Paws and Stripes (P&S)	0	10	4	3	57	26	0	0	9	7	116
Penn Foundation Inc.	0	0	1	1	58	0	0	0	3	0	63
Permission to Start Dreaming Foundation	0	2	5	13	142	17	0	0	14	5	198
Reboot Recovery	0	0	1	5	39	5	0	0	3	0	53
Rhode Island Department of Health	0	0	0	5	20	2	0	0	0	0	27
Rowan University School of Osteopathic Medicine	0	0	0	3	17	3	0	0	0	0	23
Sabine Valley Regional Mental Health Mental Retardation Center	0	0	0	9	40	1	0	0	5	0	55
Society of St. Vincent de Paul South Pinellas, Inc.	0	2	2	64	111	15	0	2	14	2	212
South Carolina Department of Veterans Affairs	0	0	0	1	5	0	0	0	0	1	7
Southern Alabama AHEC	0	1	0	43	10	0	0	0	1	0	55
Start Corporation	0	5	1	39	37	0	0	0	4	0	86
Swords To Plowshares Veterans Rights Organization	0	0	1	16	14	6	0	1	8	4	50
Transitional Living Services	0	0	0	4	10	1	0	0	1	1	17
United States Veterans Initiative-DC	0	0	0	35	2	0	0	0	6	4	47
United States Veterans Initiative-NV	0	1	3	49	68	9	1	3	6	5	145
Upstate Warrior Solution Inc.	0	3	1	92	296	10	0	1	10	24	437

Organization Legal Name	AN	AI	A	B/AA	W/C	H/L	NH	PI	2+	O	Total
US Vets-Arizona	0	16	0	12	147	14	1	1	7	4	202
US Vets-Texas	0	1	1	65	39	11	0	1	3	5	126
Valley-Wide Health Systems* (Southeast Mental Health Services)	0	0	0	0	7	0	0	0	1	0	8
Veteran Rites, Inc.	0	1	0	3	19	2	0	0	1	1	27
Veteran Social Services, Inc.	0	0	0	0	0	0	0	0	0	0	0
Veterans Bridge Home Inc.	0	4	6	505	224	29	0	3	28	52	851
Veterans Community Project	0	2	0	34	80	4	0	0	1	4	125
Veterans Inc.	1	2	3	15	111	13	0	0	15	8	168
Veterans Leadership Program of Western Pennsylvania, Inc.	0	0	0	16	38	1	0	0	0	0	55
Veterans Multi-Service Center, Inc.	0	0	2	121	49	16	0	0	6	6	200
Veterans One-stop Center of WNY, Inc.	0	0	1	22	61	4	0	0	3	5	96
Veterans Outreach of Wisconsin	0	0	0	4	6	1	0	0	2	0	13
Volunteers of America Chesapeake	0	0	2	55	27	4	1	0	7	6	102
Volunteers of America Mid-States, Inc.	0	1	0	18	81	2	0	0	5	5	112
Volunteers of America of Greater Ohio, Inc.	0	0	0	20	18	1	0	1	1	3	44
Volunteers of America of Illinois	0	0	0	71	22	8	0	0	6	1	108
Volunteers of America of Michigan, Inc.	1	2	0	65	63	6	0	0	0	7	144
Volunteers of America, Northern Rockies	0	13	2	7	193	12	0	0	22	4	253
War Horses for Veterans, Inc.	0	0	0	0	23	1	0	0	1	0	25
Washington State Department of Veterans Affairs	1	2	0	0	54	2	0	1	0	1	61
West Care California, Inc.	0	0	0	26	51	24	0	0	12	4	117
West Care Kentucky Inc.	1	0	2	7	248	0	0	0	1	1	260

Organization Legal Name	AN	AI	A	B/AA	W/C	H/L	NH	PI	2+	O	Total
West Care Oregon, Inc.	0	1	2	6	97	5	0	3	4	1	119
West Care Tennessee Inc.	0	2	0	3	58	1	0	0	1	3	68
Western Tidewater Community Services Board	1	0	3	73	46	5	0	0	2	4	134
Zero8Hundred, Inc.	0	0	0	2	1	2	0	0	0	0	5
Grand Total	19	293	111	2889	5130	635	20	154	521	354	10126

*= grantees who have changed their legal name at any time during award period.

The count of missing/did not respond: 455.

Participants had the ability to choose more than one indicator for these demographic categories, therefore multiple responses were allowed.

Response options for race and ethnicity were defined as above including response options for prefer not to answer or other. These responses, if chosen, were grouped into the column Other.

e. Eligible Individuals Enrolled in the Patient Enrollment System of the Department under 38 U.S.C. §1705(a) (§ 201(k)(1)(B)(iii)(II))

Data are self-reported or verified at local level by grantee upon intake; not applicable for non-Veteran family member participants or active duty Service members.

Organization Legal Name	Yes, enrolled	Pending	Total
Adaptive Performance Center	111	6	117
Aleutian Pribilof Islands Association, Inc.	22	0	22
Alliance, Inc.	210	1	211
American Samoa Government	97	4	101
Americas Warrior Partnership Inc	47	0	47
Arizona Department of Veterans' Services	281	6	287
Asheville Buncombe Community Christian Ministry, Inc.	115	2	117
Aspire Health Partners	12	0	12
Black Veterans for Social Justice, Inc.	157	15	172
Blue Star Families	13	0	13
Bluebonnet Trails Community MHMR Center	35	0	35

Organization Legal Name	Yes, enrolled	Pending	Total
Boulder Crest Foundation	195	4	199
Catholic Charities Hawaii	45	1	46
Center for Veterans Issues, Ltd.	76	1	77
Central Nebraska Community Action Partnership, Inc	88	2	90
Cherokee Nation	86	4	90
Cheyenne and Arapaho Tribes of Oklahoma	1	0	1
Chicanos Por La Causa, Inc.	37	0	37
Child and Family Service	46	0	46
Choctaw Nation of Oklahoma	76	3	79
Clear Path For Veterans, Inc.	4	0	4
Community Action Program Corporation of Washington-Morgan Counties, Ohio	21	0	21
Community Building Art Works	19	0	19
Community Hope, Inc.	35	1	36
Community Service Council of Greater Tulsa, Inc.	37	0	37
Council on Substance Abuse-NCADD	53	2	55
County of Oneida	12	5	17
County of Santa Clara	0	0	0
Easter seals Capital Region & Eastern Connecticut, Inc.	9	0	9
Every Mind, Inc.	81	2	83
Family Endeavors, Inc.	22	3	25
Georgia Department of Veterans Service	62	2	64
Got Your Six Seven One	23	2	25
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	23	2	25
Harbor Homes, Inc.	78	4	82
Harris County Texas Veterans Services Department	141	3	144
Healing Warriors Program	175	1	176
Highland Rivers Community Service Board	37	3	40
Homeward Bound USA Inc. Adirondacks	60	5	65
Hope Center, Inc.	4	0	4

Organization Legal Name	Yes, enrolled	Pending	Total
Illinois Joining Forces Foundation	56	1	57
Legal Aid Society Inc.	5	0	5
Maine Dept of Defense Veterans and Emergency Management	73	2	75
Mental Health America of Dutchess County Inc	146	2	148
Michigan Department of Military and Veterans Affairs	17	0	17
Modern Military Association of America, Inc.	3	0	3
Montachusett Veterans Outreach Center, Inc.	62	4	66
National Community Health Partners	62	2	64
Nation's Finest	114	2	116
Nine Line Veteran Services	42	8	50
Northwest Florida Comprehensive Services for Children Inc	466	2	468
Operation Stand Down Tennessee	138	8	146
Paws and Stripes (P&S)	97	2	99
Penn Foundation Inc.	28	0	28
Permission to Start Dreaming Foundation	141	8	149
Reboot Recovery	39	1	40
Rhode Island Department of Health	12	1	13
Rowan University School of Osteopathic Medicine	12	0	12
Sabine Valley Regional Mental Health Mental Retardation Center	39	2	41
Society of St. Vincent de Paul South Pinellas, Inc.	158	2	160
South Carolina Department of Veterans Affairs	5	0	5
Southern Alabama AHEC	52	0	52
Start Corporation	64	3	67
Swords To Plowshares Veterans Rights Organization	24	2	26
Transitional Living Services	11	0	11
United States Veterans Initiative-DC	38	1	39
United States Veterans Initiative-NV	116	1	117
Upstate Warrior Solution Inc.	344	4	348
US Vets-Arizona	177	1	178

Organization Legal Name	Yes, enrolled	Pending	Total
US Vets-Texas	110	2	112
Valley-Wide Health Systems* (Southeast Mental Health Services)	4	0	4
Veteran Rites, Inc.	23	0	23
Veteran Social Services, Inc.	0	0	0
Veterans Bridge Home Inc	717	19	736
Veterans Community Project	83	0	83
Veterans Inc.	95	3	98
Veterans Leadership Program of Western Pennsylvania, Inc.	40	1	41
Veterans Multi-Service Center, Inc.	126	3	129
Veterans One-stop Center of WNY, Inc.	71	2	73
Veterans Outreach of Wisconsin	9	0	9
Volunteers of America Chesapeake	80	6	86
Volunteers of America Mid-States, Inc.	81	5	86
Volunteers of America of Greater Ohio, Inc.	35	1	36
Volunteers of America of Illinois	91	0	91
Volunteers of America of Michigan, Inc.	108	8	116
Volunteers of America, Northern Rockies	175	8	183
War Horses for Veterans, Inc.	14	0	14
Washington State Department of Veterans Affairs	53	0	53
West Care California, Inc.	73	1	74
West Care Kentucky Inc.	140	5	145
West Care Oregon, Inc.	68	7	75
West Care Tennessee Inc.	53	0	53
Western Tidewater Community Services Board	80	1	81
Zero8Hundred, Inc.	4	0	4
Grand Total	7520	215	7735

*= grantees who have changed their legal name at any time during award period.
The count of Veterans missing/did not respond: 21

f. Participant Branch of Service in the Armed Forces (§ 201(k)(1)(B)(iii)(III))

Organization Legal Name	Air Force	Army	Coast Guard	Marines	Navy	NOAA	N/A	Other	Public Health Service	Space Force	Total
Adaptive Performance Center	23	67	1	20	25	0	1	0	0	0	137
Aleutian Pribilof Islands Association, Inc.	6	12	0	1	6	0	4	0	0	0	29
Alliance, Inc.	29	144	1	36	46	0	0	1	0	0	257
American Samoa Government	3	88	2	4	14	0	1	0	0	0	112
Americas Warrior Partnership Inc	9	32	0	5	10	0	0	0	0	0	56
Arizona Department of Veterans' Services	51	156	3	35	70	1	0	0	0	0	316
Asheville Buncombe Community Christian Ministry, Inc.	20	77	0	23	25	0	1	1	0	0	147
Aspire Health Partners	2	18	0	5	3	0	0	0	0	0	28
Black Veterans for Social Justice, Inc.	24	145	0	51	45	0	0	0	0	0	265
Blue Star Families	9	13	3	2	9	0	4	0	0	1	41
Bluebonnet Trails Community MHMR Center	5	31	2	3	7	0	2	0	0	0	50
Boulder Crest Foundation	41	109	1	51	29	0	0	0	0	0	231
Catholic Charities Hawaii	6	33	1	8	9	0	2	0	0	0	59
Center for Veterans Issues,	13	47	1	16	22	0	0	1	0	0	100

Organization Legal Name	Air Force	Army	Coast Guard	Marines	Navy	NOAA	N/A	Other	Public Health Service	Space Force	Total
Ltd.											
Central Nebraska Community Action Partnership, Inc	21	48	2	13	22	0	0	1	0	0	107
Cherokee Nation	20	52	2	13	23	0	1	0	0	0	111
Cheyenne and Arapaho Tribes of Oklahoma	0	0	0	0	1	0	0	0	0	0	1
Chicanos Por La Causa, Inc.	3	24	0	3	9	0	3	0	0	0	42
Child and Family Service	21	77	3	3	32	0	5	0	0	0	141
Choctaw Nation of Oklahoma	11	76	0	18	15	0	7	2	2	0	131
Clear Path For Veterans, Inc.	0	2	0	0	2	0	0	0	0	0	4
Community Action Program Corporation of Washington-Morgan Counties, Ohio	1	17	0	3	5	0	0	0	0	0	26
Community Building Art Works	4	13	0	1	4	0	0	0	0	0	22
Community Hope, Inc.	5	25	0	6	12	0	0	0	0	0	48
Community Service Council of Greater Tulsa, Inc.	7	33	0	4	5	0	0	0	0	0	49
Council on Substance Abuse-NCADD	7	35	2	12	9	0	0	0	0	0	65
County of Oneida	1	15	1	2	1	0	0	0	0	0	20
County of Santa Clara	0	0	0	0	0	0	0	0	0	0	0
Easterseals Capital Region & Eastern Connecticut, Inc.	1	7	0	2	1	0	1	0	0	0	12
EveryMind, Inc.	20	48	2	13	21	0	0	2	0	0	106
Family Endeavors, Inc.	3	28	0	0	0	0	1	0	0	0	32

Organization Legal Name	Air Force	Army	Coast Guard	Marines	Navy	NOAA	N/A	Other	Public Health Service	Space Force	Total
Georgia Department of Veterans Service	9	61	0	11	12	0	8	2	0	0	103
Got Your Six Seven One	6	19	0	2	4	0	0	0	0	0	31
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	4	16	0	2	8	0	0	0	0	0	30
Harbor Homes, Inc.	12	56	4	23	24	1	3	0	0	0	123
Harris County Texas Veterans Services Department	11	84	4	27	42	0	0	0	0	0	168
Healing Warriors Program	43	84	3	23	48	0	14	0	0	1	216
Highland Rivers Community Service Board	6	39	1	8	8	0	0	1	0	0	63
Homeward Bound USA Inc. Adirondacks	17	31	1	8	19	0	0	0	0	0	76
Hope Center, Inc.	0	5	0	0	2	0	0	0	0	0	7
Illinois Joining Forces Foundation	8	39	0	6	12	0	0	0	0	0	65
Legal Aid Society Inc.	0	4	0	2	1	0	0	0	0	0	7
Maine Dept of Defense Veterans and Emergency Management	8	48	0	8	25	0	0	1	0	0	90
Mental Health America of Dutchess County Inc	29	77	2	45	23	0	9	0	0	0	185
Michigan Department of Military and Veterans Affairs	3	11	0	4	6	0	0	0	0	0	24
Modern Military Association of America, Inc.	0	2	0	0	1	0	0	0	0	0	3
Montachusett Veterans	6	45	2	15	11	0	4	0	0	0	83

Organization Legal Name	Air Force	Army	Coast Guard	Marines	Navy	NOAA	N/A	Other	Public Health Service	Space Force	Total
Outreach Center, Inc.											
National Community Health Partners	9	37	0	22	14	0	13	0	0	0	95
Nation's Finest	19	58	4	27	43	0	3	1	0	0	155
NineLine Veteran Services	8	39	0	6	22	0	5	1	0	0	81
Northwest Florida Comprehensive Services for Children Inc.	67	338	3	53	113	0	3	1	0	0	578
Operation Stand Down Tennessee	10	125	1	23	26	0	0	0	0	0	185
Paws and Stripes (P&S)	26	49	0	12	16	0	12	0	0	0	115
Penn Foundation Inc.	8	30	1	6	10	0	4	0	0	0	59
Permission to Start Dreaming Foundation	37	98	3	25	34	0	0	1	0	0	198
Reboot Recovery	10	32	0	4	3	0	3	0	0	0	52
Rhode Island Department of Health	0	14	1	5	6	0	1	0	0	0	27
Rowan University School of Osteopathic Medicine	4	16	0	2	1	0	0	0	0	0	23
Sabine Valley Regional Mental Health Mental Retardation Center	10	28	0	4	12	0	1	0	0	0	55
Society of St. Vincent de Paul South Pinellas, Inc.	24	99	4	26	60	0	4	0	0	0	217
South Carolina Department of Veterans Affairs	1	4	0	1	1	0	0	0	0	0	7
Southern Alabama AHEC	6	40	0	1	8	0	0	0	0	0	55
Start Corporation	7	47	1	13	18	0	0	0	0	0	86
Swords To Plowshares Veterans Rights	4	23	0	12	7	0	1	3	0	0	50

Organization Legal Name	Air Force	Army	Coast Guard	Marines	Navy	NOAA	N/A	Other	Public Health Service	Space Force	Total
Organization											
Transitional Living Services	2	7	0	6	2	0	0	0	0	0	17
United States Veterans Initiative-DC	7	24	0	10	7	0	0	0	0	0	48
United States Veterans Initiative-NV	20	66	0	25	33	0	1	0	0	0	145
Upstate Warrior Solution Inc.	54	235	6	69	70	0	2	1	0	0	437
US Vets-Arizona	29	79	2	35	56	0	1	0	0	0	202
US Vets-Texas	10	72	0	19	26	0	0	0	0	0	127
Valley-Wide Health Systems* (Southeast Mental Health Services)	0	6	1	0	1	0	0	0	0	0	8
Veteran Rites, Inc.	5	13	0	1	7	0	1	0	0	0	27
Veteran Social Services, Inc.	0	0	0	0	0	0	0	0	0	0	0
Veterans Bridge Home Inc.	89	538	5	82	135	0	1	1	0	0	851
Veterans Community Project	11	79	1	7	26	0	0	1	0	0	125
Veterans Inc.	19	91	0	27	29	0	6	0	0	0	172
Veterans Leadership Program of Western Pennsylvania, Inc.	11	28	1	8	8	0	0	0	0	0	56
Veterans Multi-Service Center, Inc.	16	112	0	28	38	0	4	3	0	0	201
Veterans One-stop Center of WNY, Inc.	15	44	3	17	18	0	0	0	0	0	97
Veterans Outreach of Wisconsin	1	9	0	2	1	0	0	0	0	0	13
Volunteers of America	10	55	1	16	20	0	0	0	0	0	102

Organization Legal Name	Air Force	Army	Coast Guard	Marines	Navy	NOAA	N/A	Other	Public Health Service	Space Force	Total
Chesapeake											
Volunteers of America Mid-States, Inc.	13	68	2	13	15	0	3	0	0	0	114
Volunteers of America of Greater Ohio, Inc.	6	20	1	6	12	0	0	0	0	0	45
Volunteers of America of Illinois	9	64	2	10	23	0	0	0	0	0	108
Volunteers of America of Michigan, Inc.	17	83	1	18	24	0	0	0	0	0	143
Volunteers of America, Northern Rockies	27	125	5	39	31	0	19	2	0	0	248
War Horses for Veterans, Inc.	1	19	0	2	2	0	0	1	0	0	25
Washington State Department of Veterans Affairs	2	34	0	15	10	0	0	0	0	0	61
WestCare California, Inc.	16	60	0	20	19	0	2	0	0	0	117
WestCare Kentucky Inc.	31	151	0	36	35	0	3	0	0	0	256
WestCare Oregon, Inc.	11	67	1	10	26	0	1	0	0	0	116
WestCare Tennessee Inc	12	34	1	6	13	0	2	0	0	0	68
Western Tidewater Community Services Board	11	50	3	12	56	0	0	1	0	0	133
Zero8Hundred, Inc.	0	0	0	0	5	0	0	0	0	0	5
Grand Total	1233	5403	98	1318	1870	2	167	29	2	2	10124

*= grantees who have changed their legal name at any time during award period.

The count of missing/did not respond: 457

g. Participant Era of Service in the Armed Forces (§ 201(k)(1)(B)(iii)(IV))

WW = WWII

47-50 = Service 1/1/47-6/26/50

KC = Korean Conflict

75-90 = Service 5/8/75-8/1/90

GW = Gulf War

55 = Service 2/1/55-10/31/55

VE = Vietnam Era

P9/11 = Post 9/11

2+ = Two or More Eras

Organization Legal Name	WWII	47-50	KC	55	VE	75-90	GW	P9/11	2+	Total
Adaptive Performance Center	0	0	0	1	22	11	13	52	33	132
Aleutian Pribilof Islands Association, Inc.	0	0	0	0	7	2	1	8	5	23
Alliance, Inc.	0	0	0	2	15	57	48	94	40	256
American Samoa Government	0	0	0	0	9	5	10	43	42	109
Americas Warrior Partnership Inc	0	0	0	0	0	9	7	39	1	56
Arizona Department of Veterans' Services	0	0	1	1	41	72	33	113	55	316
Asheville Buncombe Community Christian Ministry, Inc.	0	0	0	0	10	20	26	71	19	146
Aspire Health Partners	0	0	0	0	0	0	0	27	0	27
Black Veterans for Social Justice, Inc.	0	0	0	1	35	79	31	92	19	257
Blue Star Families	0	0	0	0	0	1	2	22	19	44
Bluebonnet Trails Community MHMR Center	0	0	0	0	1	5	2	26	14	48
Boulder Crest Foundation	0	0	0	0	4	5	8	163	49	229
Catholic Charities Hawaii	0	0	1	1	6	14	9	16	4	51
Center for Veterans Issues, Ltd.	0	1	0	2	6	24	16	39	7	95
Central Nebraska Community Action Partnership, Inc	0	0	0	0	8	21	16	44	16	105
Cherokee Nation	0	0	0	0	11	12	23	50	12	108
Cheyenne and Arapaho Tribes of Oklahoma	0	0	0	0	0	0	1	0	0	1
Chicanos Por La Causa, Inc.	0	0	0	0	4	9	7	16	3	39
Child and Family Service	0	0	2	0	11	5	4	62	17	101
Choctaw Nation of Oklahoma	0	0	0	0	11	13	16	62	23	125
Clear Path For Veterans, Inc.	0	0	0	0	0	0	0	2	2	4
Community Action Program Corporation of Washington-Morgan Counties, Ohio	0	0	0	0	3	7	7	8	1	26
Community Building Art Works	0	0	0	0	0	2	3	14	3	22

Organization Legal Name	WWII	47-50	KC	55	VE	75-90	GW	P9/11	2+	Total
Community Hope, Inc.	1	0	0	0	4	5	7	25	4	46
Community Service Council of Greater Tulsa, Inc.	0	0	0	0	2	4	5	32	5	48
Council on Substance Abuse-NCADD	0	0	0	0	8	11	13	23	10	65
County of Oneida	0	0	0	0	2	2	2	9	1	16
County of Santa Clara	0	0	0	0	0	0	0	0	0	0
Easterseals Capital Region & Eastern Connecticut, Inc.	0	0	0	0	0	4	1	4	1	10
EveryMind, Inc.	0	0	0	0	2	18	21	51	13	105
Family Endeavors, Inc.	0	0	0	0	4	3	6	12	6	31
Georgia Department of Veterans Service	0	1	2	0	4	7	10	40	31	95
Got Your Six Seven One	0	0	0	0	0	2	3	22	4	31
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	0	0	2	0	7	6	3	10	2	30
Harbor Homes, Inc.	1	0	0	0	8	27	14	52	18	120
Harris County Texas Veterans Services Department	0	0	0	0	7	17	15	102	25	166
Healing Warriors Program	0	0	2	0	31	13	24	68	64	202
Highland Rivers Community Service Board	0	0	0	0	7	16	10	27	3	63
Homeward Bound USA Inc. Adirondacks	0	0	0	0	6	14	8	24	24	76
Hope Center, Inc.	0	0	0	0	1	1	1	3	1	7
Illinois Joining Forces Foundation	0	0	0	0	0	12	11	34	7	64
Legal Aid Society Inc.	0	0	0	0	1	2	2	1	1	7
Maine Dept of Defense Veterans and Emergency Management	0	0	0	0	13	24	10	22	20	89
Mental Health America of Dutchess County Inc.	0	0	0	1	24	35	13	58	46	177
Michigan Department of Military and Veterans Affairs	0	0	0	0	2	1	8	12	1	24
Modern Military Association of America, Inc.										
Montachusett Veterans Outreach Center,	0	0	0	0	4	14	12	44	4	78

Organization Legal Name	WWII	47-50	KC	55	VE	75-90	GW	P9/11	2+	Total
Inc.										
National Community Health Partners	0	0	1	0	12	10	13	33	15	84
Nation's Finest	0	0	1	0	26	31	23	63	9	153
NineLine Veteran Services	0	0	0	0	1	4	3	56	13	77
Northwest Florida Comprehensive Services for Children Inc.	0	0	0	2	33	152	62	213	91	553
Operation Stand Down Tennessee	0	0	1	0	11	22	13	105	33	185
Paws and Stripes (P&S)	0	0	0	0	3	11	16	43	29	102
Penn Foundation Inc.	0	0	2	0	15	12	6	11	10	56
Permission to Start Dreaming Foundation	0	0	0	0	1	0	19	93	83	196
Reboot Recovery	0	0	0	0	2	1	9	18	19	49
Rhode Island Department of Health	0	0	0	0	7	6	4	4	5	26
Rowan University School of Osteopathic Medicine	0	0	0	0	3	3	4	11	1	22
Sabine Valley Regional Mental Health Mental Retardation Center	0	0	0	0	2	3	8	22	19	54
Society of St. Vincent de Paul South Pinellas, Inc.	0	0	0	0	25	60	36	59	28	208
South Carolina Department of Veterans Affairs	0	0	0	0	0	3	0	4	0	7
Southern Alabama AHEC	0	0	0	0	6	18	16	4	11	55
Start Corporation	0	0	0	0	6	20	15	28	15	84
Swords To Plowshares Veterans Rights Organization	0	0	0	0	7	13	7	20	1	48
Transitional Living Services	0	0	0	0	2	0	0	10	3	15
United States Veterans Initiative-DC	0	0	0	0	4	10	4	19	11	48
United States Veterans Initiative-NV	0	0	0	0	9	42	26	40	22	139
Upstate Warrior Solution Inc	0	0	0	0	33	41	42	187	123	426
US Vets-Arizona	0	0	0	0	22	58	33	53	34	200
US Vets-Texas	0	0	0	0	7	29	25	64	2	127
Valley-Wide Health Systems* (Southeast	0	0	0	0	1	1	1	3	2	8

Organization Legal Name	WWII	47-50	KC	55	VE	75-90	GW	P9/11	2+	Total
Mental Health Services)										
Veteran Rites, Inc.	0	0	0	0	0	0	3	8	15	26
Veteran Social Services, Inc.	0	0	0	0	0	0	0	0	0	0
Veterans Bridge Home Inc	0	0	0	0	40	146	109	491	64	850
Veterans Community Project	0	0	0	0	5	26	24	57	13	125
Veterans Inc.	0	0	0	0	7	30	20	87	21	165
Veterans Leadership Program of Western Pennsylvania, Inc.	0	0	0	0	3	18	7	22	6	56
Veterans Multi-Service Center, Inc.	0	0	0	3	13	70	29	62	16	193
Veterans One-stop Center of WNY, Inc.	0	0	0	0	9	24	9	35	17	94
Veterans Outreach of Wisconsin	0	0	0	0	1	3	1	7	1	13
Volunteers of America Chesapeake	0	0	0	1	6	23	11	40	21	102
Volunteers of America Mid-States, Inc.	0	0	0	1	7	16	15	45	20	104
Volunteers of America of Greater Ohio, Inc.	0	0	0	0	3	14	8	12	5	42
Volunteers of America of Illinois	0	0	0	0	9	36	15	30	18	108
Volunteers of America of Michigan, Inc.	0	0	0	0	16	51	20	35	15	137
Volunteers of America, Northern Rockies	0	0	1	0	18	26	26	95	70	236
War Horses for Veterans, Inc.	0	0	0	0	0	0	1	18	6	25
Washington State Department of Veterans Affairs	0	0	0	0	11	2	8	29	9	59
WestCare California, Inc.	0	0	0	0	20	28	18	24	22	112
WestCare Kentucky Inc.	0	0	1	0	65	60	39	74	15	254
WestCare Oregon, Inc.	1	0	0	0	17	38	16	27	17	116
WestCare Tennessee Inc.	0	0	0	0	11	16	4	23	13	67
Western Tidewater Community Services Board	0	0	0	2	13	18	14	76	9	132
Zero8Hundred, Inc.	0	0	0	0	0	0	0	5	0	5
Grand Total	3	2	17	18	853	1806	1264	4204	1649	9816

*= grantees who have changed their legal name at any time during award period.

Participant family members are identified by their Veteran's era. The count of missing/did not respond: 765

h. Type of Services Received by Participants*

CSET = Clinical Services for Emergency Treatment

CM = Case Management

PSS = Peer Support Specialist

VAB = Assistance with VA Benefits

OB = Assistance with Other Public Benefits and Emergent Needs

NI = Nontraditional and Innovative Approaches

O = Other Services as Approved by VA

Organization Legal Name	CSET	CM	PSS	VAB	OB	NI	O
Adaptive Performance Center	1	23	2	13	37	536	0
Aleutian Pribilof Islands Association, Inc.	0	180	14	0	0	87	59
Alliance, Inc.	1	229	11	3	2	0	0
American Samoa Government	0	0	6	0	0	83	0
Americas Warrior Partnership Inc.	0	15	0	14	5	5	3
Arizona Department of Veterans' Services	0	19	0	0	0	168	0
Asheville Buncombe Community Christian Ministry, Inc.	2	967	47	12	18	2	9
Aspire Health Partners	0	0	0	0	0	0	3
Black Veterans for Social Justice, Inc.	1	61	6	14	5	0	8
Blue Star Families	2	0	105	0	0	0	30
Bluebonnet Trails Community MHMR Center	1	4	0	0	4	0	4
Boulder Crest Foundation	0	0	0	0	0	529	0
Catholic Charities Hawaii	3	358	2	50	22	15	23
Center for Veterans Issues, Ltd.	8	397	15	14	61	1	1
Central Nebraska Community Action Partnership, Inc.	3	1151	1426	213	1183	76	330
Cherokee Nation	5	842	406	77	91	83	102
Cheyenne and Arapaho Tribes of Oklahoma	0	0	0	0	0	0	1
Chicanos Por La Causa, Inc.	1	60	55	10	57	24	21
Child and Family Service	1	227	0	1	1	0	1
Choctaw Nation of Oklahoma	1	436	183	9	24	33	84
Clear Path For Veterans, Inc.	0	3	4	1	4	1	3
Community Action Program Corporation of Washington-Morgan Counties, Ohio	1	95	0	2	18	3	0
Community Building Art Works	0	0	0	0	0	68	0

Organization Legal Name	CSET	CM	PSS	VAB	OB	NI	O
Community Hope, Inc.	0	169	1	9	8	0	1
Community Service Council of Greater Tulsa, Inc.	2	151	16	7	4	11	14
Council on Substance Abuse-NCADD	4	73	4	13	16	1	8
County of Oneida	9	164	145	124	123	39	29
County of Santa Clara	0	0	0	0	0	0	0
Easterseals Capital Region & Eastern Connecticut, Inc.	0	0	0	0	0	0	0
EveryMind, Inc.	0	279	0	0	0	0	0
Family Endeavors, Inc.	0	75	0	12	82	99	1
Georgia Department of Veterans Service	0	0	0	0	0	0	0
Got Your Six Seven One	0	0	19	0	1	5	25
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	0	3	0	0	0	0	0
Harbor Homes, Inc.	2	398	119	6	18	9	9
Harris County Texas Veterans Services Department	39	128	21	198	185	35	94
Healing Warriors Program	1	0	0	0	0	812	0
Highland Rivers Community Service Board	2	28	23	19	13	17	9
Homeward Bound USA Inc. Adirondacks	2	109	39	10	10	65	12
Hope Center, Inc.	0	0	0	0	0	0	0
Illinois Joining Forces Foundation	2	54	2	5	1	2	2
Legal Aid Society Inc	0	0	0	0	0	0	0
Maine Dept of Defense Veterans and Emergency Management	0	551	0	1	0	0	0
Mental Health America of Dutchess County Inc	0	36	377	9	22	782	119
Michigan Department of Military and Veterans Affairs	0	4	0	0	1	0	0
Modern Military Association of America, Inc.	0	12	0	6	0	0	4
Montachusett Veterans Outreach Center, Inc.	2	276	34	251	23	71	149
National Community Health Partners	1	912	96	0	0	0	0
Nation's Finest	31	446	196	16	83	1	54
NineLine Veteran Services	1	151	4	26	54	11	13
Northwest Florida Comprehensive Services for Children Inc	15	2204	66	539	461	29	22
Operation Stand Down Tennessee	16	365	0	104	19	3	154
Paws and Stripes (P&S)	0	401	318	1	0	378	83

Organization Legal Name	CSET	CM	PSS	VAB	OB	NI	O
Penn Foundation Inc	2	143	297	32	56	1	14
Permission to Start Dreaming Foundation	0	0	0	0	0	508	0
Reboot Recovery	0	164	44	0	0	277	292
Rhode Island Department of Health	1	32	3	7	0	0	6
Rowan University School of Osteopathic Medicine	0	0	0	0	0	0	0
Sabine Valley Regional Mental Health Mental Retardation Center	1	375	80	14	17	1	2
Society of St. Vincent de Paul South Pinellas, Inc.	1	975	3	2	1	0	4
South Carolina Department of Veterans Affairs	0	0	13	0	0	0	0
Southern Alabama AHEC	0	15	4	156	34	101	166
Start Corporation	1	148	259	22	29	1	1
Swords To Plowshares Veterans Rights Organization	0	0	0	0	0	0	0
Transitional Living Services	0	40	14	4	6	1	9
United States Veterans Initiative – DC	0	56	1	16	5	2	4
United States Veterans Initiative – NV	0	246	47	4	1	0	1
Upstate Warrior Solution Inc	9	225	32	223	132	73	42
US Vets-Arizona	0	800	0	57	12	226	18
US Vets-Texas	27	167	2	385	70	8	168
Valley-Wide Health Systems* (Southeast Mental Health Services)	2	0	0	0	0	0	1
Veteran Rites, Inc.	0	0	0	0	0	19	0
Veteran Social Services, Inc.	0	0	0	0	0	0	0
Veterans Bridge Home Inc	0	550	0	0	0	2	1
Veterans Community Project	0	128	0	0	0	0	0
Veterans Inc.	4	58	2	20	8	1	1
Veterans Leadership Program of Western Pennsylvania, Inc.	0	390	0	11	7	7	8
Veterans Multi-Service Center, Inc.	0	429	111	1	0	0	0
Veterans One-stop Center of WNY, Inc.	6	453	8	8	3	12	6
Veterans Outreach of Wisconsin	6	24	40	6	11	5	3
Volunteers of America Chesapeake	2	650	0	30	96	28	4
Volunteers of America Mid-States, Inc.	0	542	0	0	34	295	12
Volunteers of America of Greater Ohio, Inc.	0	234	84	68	32	0	4

Organization Legal Name	CSET	CM	PSS	VAB	OB	NI	O
Volunteers of America of Illinois	18	234	295	0	3	4	3
Volunteers of America of Michigan, Inc.	10	1180	773	15	3	0	1
Volunteers of America, Northern Rockies	0	2	254	0	2	86	263
War Horses for Veterans, Inc	0	0	0	0	0	48	0
Washington State Department of Veterans Affairs	0	67	5	155	20	206	73
WestCare California, Inc.	5	395	1	27	24	13	16
WestCare Kentucky Inc.	6	1707	1575	111	145	3	8
WestCare Oregon, Inc.	0	125	62	4	31	1	25
WestCare Tennessee Inc.	11	101	2	11	11	0	2
Western Tidewater Community Services Board	39	204	543	317	11	0	5
Zero8Hundred, Inc.	0	6	0	0	0	0	0
Grand Total	311	22919	8316	3495	3460	6013	2647

*= grantees who have changed their legal name at any time during award period.

This table does not include baseline mental health screening (required for all), referrals (an indirect service), nor outreach and education/training, as the latter two are reflected within the outreach effort discussion above. These numbers reflect the type of service received by each participant, not the total number of service sessions received.

i. Eligible Individual Referrals to the Department (§ 201(k)(1)(B)(viii))

Each eligible individual (Veteran or Service member) can have more than one referral.

Organization Legal Name	Vet Center referral count	VBA referral count	VHA referral count	Unique Individuals Referred to all VA	% of Eligible Individuals Referred to VA
Adaptive Performance Center	1	2	4	7	5%
Aleutian Pribilof Islands Association, Inc.	11	1	15	22	88%
Alliance, Inc.	6	13	7	23	9%
American Samoa Government	3	1	18	22	20%
America's Warrior Partnership Inc.	2	2	16	19	34%

Organization Legal Name	Vet Center referral count	VBA referral count	VHA referral count	Unique Individuals Referred to all VA	% of Eligible Individuals Referred to VA
Arizona Department of Veterans' Services	104	7	83	194	61%
Asheville Buncombe Community Christian Ministry, Inc.	9	9	83	89	60%
Aspire Health Partners	1	0	0	1	4%
Black Veterans for Social Justice	2	5	24	29	11%
Blue Star Families	0	0	16	16	80%
Bluebonnet Trails Community MHMR Center	7	1	4	11	23%
Boulder Crest Foundation	0	6	179	183	79%
Catholic Charities Hawaii	2	6	56	56	98%
Center for Veterans Issues, Ltd.	10	3	9	22	22%
Central Nebraska Community Action Partnership, Inc.	17	50	84	89	83%
Cherokee Nation	22	18	56	69	61%
Cheyenne and Arapaho Tribes of Oklahoma	0	0	0	0	0%
Chicanos Por La Causa, Inc.	1	5	34	38	97%
Child and Family Service	2	11	61	67	49%
Choctaw Nation of Oklahoma	5	7	54	61	53%
Clear Path For Veterans, Inc.	0	0	0	0	0%
Community Action Program Corporation of Washington-Morgan Counties, Ohio	1	1	20	21	81%
Community Building Art Works	2	0	1	3	14%
Community Hope, Inc.	3	4	1	7	15%
Community Service Council of Greater Tulsa, Inc.	0	0	8	8	16%
Council on Substance Abuse-NCADD	5	1	9	15	23%
County of Oneida	3	8	14	14	70%
County of Santa Clara	0	0	0	0	0%
Easter Seals Capital Region & Eastern	0	0	0	0	0%

Organization Legal Name	Vet Center referral count	VBA referral count	VHA referral count	Unique Individuals Referred to all VA	% of Eligible Individuals Referred to VA
Connecticut, Inc.					
Every Mind, Inc.	0	0	70	70	66%
Family Endeavors, Inc.	0	0	5	5	16%
Georgia Department of Veterans Service	1	0	8	9	9%
Got Your Six Seven One	0	0	0	0	0%
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	0	0	7	7	23%
Harbor Homes, Inc.	2	3	58	59	49%
Harris County Texas Veterans Services Department	6	14	62	69	41%
Healing Warriors Program	2	2	100	103	50%
Highland Rivers Community Service Board	2	5	7	11	17%
Homeward Bound USA Inc. Adirondacks	4	2	40	41	54%
Hope Center, Inc.	4	0	0	4	57%
Illinois Joining Forces Foundation	0	3	47	50	77%
Legal Aid Society	0	0	6	6	86%
Maine Dept of Defense Veterans and Emergency Management	1	16	19	27	30%
Mental Health America of Dutchess County Inc.	9	11	35	55	31%
Michigan Department of Military and Veterans Affairs	0	1	2	3	13%
Modern Military Association of America, Inc.	0	0	3	3	100%
Montachusett Veterans Outreach Center, Inc.	5	14	72	74	95%
National Community Health Partners	7	2	78	78	93%
Nation's Finest	8	22	98	103	67%
Nine Line Veterans Services	5	9	37	40	50%
Northwest Florida Comprehensive Services for	114	7	572	574	100%

Organization Legal Name	Vet Center referral count	VBA referral count	VHA referral count	Unique Individuals Referred to all VA	% of Eligible Individuals Referred to VA
Children Inc					
Operation Stand Down Tennessee	19	7	41	63	34%
Paws and Stripes (P&S)	7	5	91	97	91%
Penn Foundation Inc.	15	18	29	38	69%
Permission to Start Dreaming Foundation	5	116	10	131	66%
Reboot Recovery	0	0	3	3	6%
Rhode Island Department of Health	0	1	17	17	65%
Rowan University School of Osteopathic Medicine	2	0	7	9	39%
Sabine Valley Regional Mental Health Mental Retardation Center	5	2	31	35	65%
Society of St. Vincent de Paul South Pinellas, Inc.	13	13	183	185	86%
South Carolina Department of Veterans Affairs	5	0	0	5	71%
Southern Alabama AHEC	12	5	24	38	69%
Start Corporation	2	23	33	41	48%
Swords to Plowshares Veterans Rights Organization	0	0	23	23	46%
Transitional Living Services	0	3	2	4	24%
United States Veterans Initiative-DC	4	5	14	21	45%
United States Veterans Initiative-NV	1	7	43	44	30%
Upstate Warrior Solution Inc.	8	14	103	107	25%
US Vets-Arizona	0	3	188	188	93%
US Vets-Texas	0	1	0	1	1%
Valley-Wide Health Systems* (Southeast Mental Health Services)	1	0	1	2	25%
Veteran Rites, Inc.	0	0	13	13	50%
Veteran Social Services, Inc.	0	0	0	0	0%
Veterans Bridge Home Inc.	2	20	361	362	43%

Organization Legal Name	Vet Center referral count	VBA referral count	VHA referral count	Unique Individuals Referred to all VA	% of Eligible Individuals Referred to VA
Veterans Community Project	7	2	10	18	14%
Veterans Inc.	1	11	40	48	28%
Veterans Leadership Program of Western Pennsylvania, Inc.	3	5	16	19	34%
Veterans Multi-Service Center, Inc.	2	5	169	169	85%
Veterans One-stop Center of WNY, Inc.	11	19	56	64	67%
Veterans Outreach of Wisconsin	2	2	11	12	92%
Volunteers of America Chesapeake	14	8	73	86	84%
Volunteers of America Mid-States, Inc.	3	3	70	76	68%
Volunteers of America of Greater Ohio, Inc.	3	7	33	35	78%
Volunteers of America of Illinois	2	53	43	87	79%
Volunteers of America of Michigan, Inc.	27	12	66	92	64%
Volunteers of America, Northern Rockies	13	1	62	76	34%
War Horses for Veterans, Inc.	0	0	5	5	20%
Washington State Department of Veterans Affairs	27	36	16	42	69%
WestCare California, Inc.	2	8	20	27	23%
WestCare Kentucky Inc.	198	65	32	214	85%
WestCare Oregon, Inc.	1	0	10	11	10%
WestCare Tennessee Inc.	11	9	14	28	43%
Western Tidewater Community Services Board	14	13	102	107	82%
Zero8Hundred, Inc.	0	0	2	2	40%
Grand Total	831	774	4249	5122	51%

*= grantees who have changed their legal name at any time during award period.

***j. Eligible Individuals Newly Enrolled in Veterans Health Administration Based on Referral from a Grant Recipient
(§ 201(k)(1)(B)(ix))***

Data is based on Veterans not enrolled in VHA at intake with grantee self-report of at least one referral to VHA.

Organization Legal Name	New Enrollees in VA Healthcare by 3/31/25
Adaptive Performance Center	0
Aleutian Pribilof Islands Association, Inc.	1
Alliance, Inc.	1
American Samoa Government	0
Americas Warrior Partnership Inc	2
Arizona Department of Veterans' Services	7
Asheville Buncombe Community Christian Ministry, Inc.	11
Aspire Health Partners	0
Black Veterans for Social Justice, Inc.	3
Blue Star Families Inc	1
Bluebonnet Trails Community MHMR Center	0
Boulder Crest Foundation	9
Catholic Charities Hawaii	7
Center for Veterans Issues, Ltd.	3
Central Nebraska Community Action Partnership, Inc	12
Cherokee Nation	9
Cheyenne and Arapaho Tribes of Oklahoma	0
Chicanos Por La Causa Inc	0
Child and Family Service	6
Choctaw Nation of Oklahoma	9
Clear Path For Veterans Inc	0
Community Action Program Corporation of Washington-Morgan Counties, Ohio	4
Community Building Art Works	0
Community Hope, Inc.	0
Community Service Council of Greater Tulsa, Inc.	3

Organization Legal Name	New Enrollees in VA Healthcare by 3/31/25
Council on Substance Abuse-NCADD	1
County of Oneida	2
County of Santa Clara	0
Easterseals Capital Region & Eastern Connecticut Inc.	0
EveryMind, Inc.	14
Family Endeavors, Inc.	0
Georgia Department of Veterans Service	0
Got Your Six Seven one	0
Great Plains Veterans Services Center* (Rocky Boy Veterans Center)	0
Harbor Homes, Inc.	14
Harris County Texas	10
Healing Warriors Program	10
Highland Rivers Community Service Board	1
Homeward Bound USA Inc Adirondacks	8
Hope Center, Inc.	0
Illinois Joining Forces Foundation	4
Legal Aid Society Inc	2
Maine Dept of Defense Veterans and Emergency Management	4
Mental Health America of Dutchess County Inc	6
Michigan Department of Military and Veterans Affairs	2
Modern Military Association of America, Inc.	0
Montachusett Veterans Outreach Center, Inc.	9
National Community Health Partners	14
Nation's Finest	20
NineLine Veteran Services	10
Northwest Florida Comprehensive Services for Children, Inc.	100
Operation Stand Down Tennessee	9
Paws and Stripes (P&S)	2
Penn Foundation Inc	14

Organization Legal Name	New Enrollees in VA Healthcare by 3/31/25
Permission to Start Dreaming Foundation	0
Reboot Recovery	0
Rhode Island Department of Health	9
Rowan University School of Osteopathic Medicine	3
Sabine Valley Regional Mental Health Mental Retardation Center	7
Society of St. Vincent de Paul South Pinellas, Inc.	43
South Carolina Department of Veterans Affairs	0
Southern Alabama AHEC	2
Start Corporation	11
Swords To Plowshares Veterans Rights Organization	13
Transitional Living Services	0
United States Veterans Initiative-DC	1
United States Veterans Initiative-NV	2
Upstate Warrior Solution, Inc	10
US Vets-Texas	0
US Vets-Arizona	21
Valley-Wide Health Systems* (Southeast Mental Health Services)	0
Veteran Rites Inc	1
Veteran Social Services, Inc	0
Veterans Bridge Home Inc	31
Veterans Community Project	2
Veterans Inc.	15
Veterans Leadership Program of Western Pennsylvania, Inc.	3
Veterans Multi-Service Center, Inc.	57
Veterans One-stop Center of WNY, Inc.	12
Veterans Outreach of Wisconsin	4
Volunteers of America Chesapeake	12
Volunteers of America Mid-States, Inc.	17
Volunteers of America of Greater Ohio, Inc.	6

Organization Legal Name	New Enrollees in VA Healthcare by 3/31/25
Volunteers of America of Illinois	11
Volunteers of America of Michigan, Inc.	15
Volunteers of America, Northern Rockies	4
War Horses for Veterans, Inc	0
Washington State Department of Veterans Affairs	1
WestCare California, Inc.	5
Westcare Kentucky Inc.	19
WestCare Oregon, Inc.	4
Westcare Tennessee Inc	4
Western Tidewater Community Services Board	36
Zero8Hundred, Inc.	1
Grand Total	726

*= grantees who have changed their legal name at any time during award period.

Note: A correction to the interim report is that through 9/30/23 there were 223 unique eligible individuals previously not enrolled with VA with a referral to VHA compared to the original number cited of 769 which was a count of referrals to VHA and VBA by both eligible and ineligible individuals.

References

- Cohen, S., Mermelstein, R., Kamarck, T., Hoberman, H.M. (1985). Measuring the Functional Components of Social Support. In: Sarason, I.G., Sarason, B.R. (eds) Social Support: Theory, Research and Applications. NATO ASI Series, vol 24. Springer, Dordrecht. https://doi.org/10.1007/978-94-009-5115-0_5
- Columbia-Suicide Severity Rating Scale (C-SSRS) Posner, Brent, Lucas, Gould, Stanley, Brown, Fisher, Zelazny, Burke, Oquendo, & Mann © 2008 The Research Foundation for Mental Hygiene, Inc.
- Kroenke, K., Spitzer, R. L., & Williams, J. B. (2001). The PHQ-9: validity of a brief depression severity measure. *Journal of general internal medicine*, 16(9), 606–613. <https://doi.org/10.1046/j.1525-1497.2001.016009606.x>
- Schwarzer, R., & Jerusalem, M. (1995). Generalized Self-Efficacy scale. In J. Weinman, S. Wright, & M. Johnston, *Measures in health psychology: A user's portfolio. Causal and control beliefs* (pp. 35-37). Windsor, UK: NFER-NELSON.
- Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., Parkinson, J., Secker, J., & Stewart-Brown, S. (2007). The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): Development and UK validation. *Health and Quality of Life Outcomes*, 5, Article 63. <https://doi.org/10.1186/1477-7525-5-63>
- U.S. Department of Veterans Affairs, Office of Suicide Prevention. 2024 National Veteran Suicide Prevention Annual Report. 2024. Retrieved from https://www.mentalhealth.va.gov/docs/data-sheets/2024/2024-Annual-Report-Part-2-of-2_508.pdf
- U.S. Department of Veterans Affairs, Quality Enrichment Research Initiative. (n.d.). Partnered Evidence-based Policy Resource Center. Retrieved from https://www.peprec.research.va.gov/PEPRECRESEARCH/docs/Policy_Brief_12_EB_P_Checklist.pdf