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What Do Veterans Service Organizations' Websites Say About Tobacco Control?

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Abstract

Purpose—Little is known about Veterans Service Organizations (VSOs) and their perspectives on veterans smoking or military tobacco control. Veterans have high smoking rates and many started smoking in the military, where a culture promoting use exists.

Design—We conducted a cross-sectional qualitative content analysis of VSO websites to classify health topics and identify tobacco-related information.

Setting—Websites were coded by trained raters from January-June of 2011. Data were entered, cleaned and analyzed from July 2011-January 2012.

Participants—24 active VSO websites meeting inclusion criteria were rated independently.

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AUTHORS CONTRIBUTIONS

WSC Poston was involved in the study origination and design, obtaining funding, data analysis and interpretation, and was chiefly responsible for writing the manuscript.

CK Haddock was involved in the study origination and design, obtaining funding, data analysis and interpretation, and critical revision of the manuscript.

SA Jahnke was involved in the study origination and design, study supervision, data acquisition, and critical revision of the manuscript.

N. Jitnarin was involved in study design, interpretation of results, and critical revision of the manuscript.

All authors read and approved the final manuscript.

COMPETING INTERESTS

None declared.

Method—A comprehensive form was used to code 15 veteran-relevant health topics across multiple content areas/domains within the websites. Raters achieved 94.5% inter-rater agreement over nearly 5,000 data-points.

Results—A total of 277 health topics were addressed with the top five being Insurance/Tricare/VA issues (28.2%), PTSD (15.5%), disability/amputation/wounds (13.4%), Agent Orange (10.5%), and traumatic brain injury (TBI; 9.0%). Tobacco was mentioned four times (1.4%) across all 24 VSO websites and smoking cessation was never addressed.

Conclusions—VSO websites provide little information on tobacco-related topics and none offered information about smoking cessation. Given the high rates of tobacco use among veterans and active duty service members, and the interaction between smoking and PTSD symptoms and treatment outcomes, VSOs should consider making tobacco control and smoking cessation higher priority health issues on their websites.

Keywords

Tobacco control; veterans; smoking; content analysis; military

Indexing Key Words

Manuscript format: Research; Research purpose: descriptive; Study design: qualitative; Outcome measure: website health topics coding form; Setting: veterans service organization websites; Health focus: tobacco control; Target population: US military veterans; Target population circumstances: national

PURPOSE

Estimates suggest that there are approximately 22.7 million military veterans in the United States and it is widely accepted that our nation has a unique responsibility to promote their health and well-being.¹ One persistent health disparity in this population is the relatively high rates of smoking among veterans compared to those who never serviced in the US Military. For instance, in the 1990's Klevens and colleagues² found that rates of ever smoking and current smoking were significantly higher for veterans (74.2% and 33.9%, respectively) than for non-veterans (48.4% and 27.7%, respectively). The gap between the smoking rates of veterans and non-veterans persists in more recent studies³⁻⁵ and closing this gap has been stymied by the fact that veterans who smoke are less likely to quit⁵ and have been specifically targeted by the tobacco industry.⁶ The gap also persists despite the fact that a majority (58% to 70%)^{7,8} of veteran smokers want to quit. Thus, the high rate of smoking among veterans, most of whom wish to quit, represents a neglected social issue in our nation's public health infrastructure^{2,9-11}

Veterans Service Organizations (VSOs) such as the *American Legion* and the *Disabled American Veterans* represent veterans and their interests on a number of health and economic issues. The US Veteran's Administration (VA) listed 54 chartered (i.e., approved by the VA Secretary for purposes of preparation, presentation, and prosecution of claims under laws administered by the Department of Veterans Affairs) and 113 unchartered VSOs, and it is likely that more loosely organized VSOs exist which are not included in the VA's registry (<http://www1.va.gov/vso/>). VSOs differ substantially in their mission and the range of veterans they serve. For instance, some VSO's serve all veterans (e.g., *American Legion*, *AMVETS*) while others focus on veterans from specific conflicts (e.g., *Vietnam Veterans of America*; *Iraq and Afghanistan Veterans of America*) veterans from different eras and conflicts. VSOs are highly influential among veterans and as a lobbying force and veterans report that they consider participating in VSOs as beneficial to their lives.¹²

Little is known about VSOs and their perspectives on veterans smoking or tobacco control in the military, where many veterans start to smoke and where a culture promoting use appears to exist.^{13–16} Given the significant influence VSOs have on veterans and national veteran policy, understanding the VSOs stances on tobacco use and control could be an important part of addressing high rates of use among our nation's veterans. One approach to examining an organization's priorities, interests, and perspective is the use of content analysis of their documents and print materials. This approach has advantages over interviews with organizational leadership, where social desirability may impact the answers to questions. A number of investigators have used analysis of an organization's print documents to successfully to better understand the military's perspective on tobacco control issues^{17–20} and the tobacco industry's approach to target marketing tobacco to military troops.^{6,18,21,22} More recently, a number of investigators have applied the same approach to internet websites.^{23–27}

The purpose of this study was to conduct a content analysis of VSO websites in order to determine how VSOs convey health information to their membership, discover what health-related topics VSOs target, and to identify tobacco-related information conveyed by VSOs to their members. This is particularly relevant because there is evidence that a majority of veterans have access to and use the internet in a manner similar to non-veterans, including using it to obtain information on their health^{28–30} and the content on the VSO websites will likely influence the attitudes and behaviors of veterans toward important health topics such as tobacco use and tobacco control policy.

METHODS

DESIGN

We conducted a cross-sectional qualitative content analysis of VSO websites to classify health topics and identify tobacco-related information.

SELECTION OF VSO WEBSITES

Three strategies were used to identify relevant VSOs to include in this study. First, lists of VSOs that are chartered and those not chartered but which were recognized by the United States Department of Veterans Affairs were compiled. Our team conducted background research on each of the identified VSOs, including reviewing their website and recent communications to members. Second, VSOs which are Veterans Coalition members (<http://veterans-coalition.org/Members.html>) were considered for inclusion in the study because they identified additional VSOs that were not included on the lists of chartered and unchartered VSOs. Any organizations identified in the coalition that were not included in the original list were reviewed for applicability. Third, relevant tobacco company documents were reviewed for VSOs previously targeted for industry support. Organizations specifically identified as participating in pro-tobacco legislation and working with tobacco companies were included in the initial list.

The initial review of VSOs to include was further refined after a thorough review of the 39 organizations who passed initial screening, their websites (if available), and their promotion materials. Organizations determined to be very narrow in their focus (e.g. targeted toward a specific ethnic group, determined to be primarily a social organization, those not addressing health at all), those without a national focus, those that did not appear to be currently active, and those without a website were eliminated from the list of eligible organizations. After this review, we narrowed our final list to 24 active VSOs with active websites for inclusion in this study (see Table 1).

WEBSITE CODING PROCESS

The website content coding process was based on our content coding systems for military tobacco control studies.^{17–19} The goals for VSO website content analysis were to: 1) understand whether/how VSOs convey health information to their membership; 2) discover what health-related topics VSOs target; and 3) identify tobacco-related information conveyed by VSOs to their members. We developed qualitative and quantitative coding protocols, procedures, and manuals through an iterative and recursive process.^{17–19}

A sample of VSOs (n = 10) was selected for pilot-testing the coding form and procedures by team members. As websites were coded, additional domains of interest were discovered and coding forms were revised based on team discussion and feedback from our military and veteran project consultants. This process was repeated several times with different samples of VSO websites until team members were confident that all domains of potential interest were identified and that the coding forms appropriately captured all relevant data. A total of 15 health topics relevant to veterans were selected for coding including substance use issues (e.g., alcohol, illegal drugs, tobacco [directly or indirectly addressed], and smoking cessation), mental health topics (e.g., suicide, post-traumatic stress disorder [PTSD]), war and deployment-related health problems (e.g., disability, amputation, wounds, Traumatic Brain Injury [TBI], Gulf War Syndrome [GWS], and Agent Orange), fitness and weight (e.g., exercise, fitness, weight, body composition), and health system issues (e.g., health insurance, Tricare, Veterans Administration benefits and services, and pharmaceutical formulary provisions).

Tobacco content was defined as either directly or indirectly related to tobacco issues. Directly related tobacco topics included content where the primary focus of the information was any tobacco product (e.g., cigarettes, smokeless tobacco, cigars), tobacco use, the risks and outcomes of smoking, environmental tobacco smoke, etc. Content was coded as indirectly related to tobacco when the main focus of the information was on other issues such as personal human interest stories, policy discussions, articles about commissary pricing, etc. where tobacco use or tobacco products were incidentally mentioned (e.g., housing fires caused by smoking in bed). Smoking cessation was coded when the content directly discussed smoking cessation services or the benefits of quitting smoking.

The websites (and their content) were coded by two independent raters trained and experienced in content analysis. Because the aim of coding VSO websites was to understand how organizations convey information with their membership, websites were coded for health issues addressed or noted within each major area or domain of their website. In addition, key word searches of each site for the words “smoking”, “tobacco”, “cigarettes”, “chew” and “dip” were completed and any resulting articles were catalogued for thematic analysis. Full coding of the 24 VSO websites was conducted from January 2011 to June of 2011. Inter-rater reliability was high, with raters agreeing an average of 94.5% of the time on website content coding of nearly 5,000 data-points. Next, resolution of discrepancies between the two coders, data entry, and data cleaning was completed between July 2011 and January 2012.

ANALYTIC APPROACH

We used SPSS (Version 20) to conduct all descriptive quantitative analyses, e.g., computing frequencies and percentages. The number of times health topics were covered by each VSO website and the number of VSO websites that mentioned a health topic in different website areas/domains were examined. In addition, we also qualitatively reviewed the content of each tobacco-related topic addressed in the VSO websites. Finally, we qualitatively reviewed the links from the key word searches summarized their content.

RESULTS

VSO Website Content

Table 2 lists the number and type of coded health topics for each VSO website.

A total of 277 health topics were addressed by the 24 VSO websites and the top five were Insurance/Tricare/VA issues (28.2%), PTSD (15.5%), disability/amputation/wounds (13.4%), Agent Orange (10.5%), and TBI (9.0%). Tobacco, directly or indirectly, was only mentioned four times (1.4%) across all 24 VSO and smoking cessation was never addressed. As can be seen in Table 2, only three VSO websites (i.e., American Legion, AMVETS, and Veterans of Foreign Wars) addressed any tobacco-related topics.

Table 3 presents where health topics were covered within VSO website areas/domains.

Most VSO websites provided areas/domains that introduced the VSO and their mission (About Us/Mission), offered resources (Resource Directory) or news (News), and discussed benefits of membership (Member Benefits). These website areas/domains also were common areas for health topic mentions, with more than 75% of VSOs addressing any health topic. Most VSOs (20 of 24) addressed Insurance/Tricare/VA related topics in their News area/domain and 17 out of 24 mentioned this same topic in their About Us/Mission section. PTSD, TBI, and Agent Orange were the next most commonly covered by 15, 12, and 12 VSOs, all in their News area/domain. Tobacco (both directly or indirectly addressed) was mentioned by only three VSOs in each of the following website areas/domains: Resource Directory, News, and Bylaws/Constitution.

The American Legion directly addressed tobacco in the both Resources/Publications and the News areas/domains of their website. In the resources section, they provided an educational brochure on gateway drugs, which was sponsored by the American Legion's National Commission on Children and Youth. The brochure was entitled "*Gateway Drugs. Choose not to use*" and highlighted the roles of alcohol, tobacco, inhalants, and marijuana "the entryway to a life of drug dependency and delinquency. Gateway drugs are so-called because the use of these drugs often leads to drug abuse, addiction, and to the use of other drugs such as heroin, cocaine, and LSD." (see <http://www.legion.org/publications/160935/gateway-drugs-choose-not-use-brochure>). The other directly tobacco-related topic was a news article entitled "Sacred Tobacco" that was published in the American Legion Magazine in February 2011 (see <http://www.legion.org/magazine/94878/sacred-tobacco>). The article discussed the Ho-Chunk Indian Nation's request that the Department of Defense stop confiscating tribal member's sacred tobacco when they are in boot camp, during inspections, or prior to overseas deployments. The author also noted that three local Legion posts were working closely together with the near the Ho-Chunk nation on this issue.

American Veterans (AMVETS) directly addressed tobacco in its Bylaws/Constitution website area/domain (see <http://www.amvets.org/pdfs/2011/2011-national-constitution-and-bylaws.pdf>; pp. 52). In this document, AMVETS discusses the issue of investments and "the propriety of areas or lines of businesses, such as Tobacco stocks or securities of companies doing business with certain countries" and concludes that its National Executive Committee will consider these issues as they arise and determine the appropriateness of AMVETS investing.

The Veterans of Foreign Wars indirectly addressed tobacco and smoking cessation in an article found in the News area/domain of their website (see <http://www.vfw.org/News-and-Events/Articles/VFW-Demands-Accountability-Over-Chantix-Issue/>). The article, published in July 2008 discussed the VFW's concern about the side effects of Chantix, a smoking

cessation drug, on veterans with PTSD. In the story, it is noted that Chantix has been linked to suicide and incidents of suicidal behavior and the VFW National Commanders concerns that veterans were not properly informed about the drug's potential side effects, particularly since they could more adversely affect veterans with PTSD.

Key Word Search of Websites

We conducted key word searches of each VSO website using the search terms “smoking”, “tobacco”, “cigarettes”, “chew”, or “dip” to uncover any additional tobacco-related links within the websites. Key word searches of the websites did not unearth any tobacco-related content in 13 of the 24 VSOs. We examined the results of the 11 VSO websites searches that had positive results and eliminated any content that was previously reviewed in the three VSOs that had any tobacco-related content (e.g., the American Legion, AMVETS, and the VFW) to identify unique content. Table 4 summarizes the topics addressed in linked stories, blogs, and other content that were related to tobacco.

Many of the stories and blog entries were about important military tobacco control issues such as the proposal to make the DoD smoke free, the Navy's ban on smoking in submarines, and reports on studies relevant to veterans' health issues in which smoking was associated with an important disease or condition. A number of the websites also had links to Congressional testimony discussing the need for funding tobacco cessation treatment services and repealing the prohibition against service-connection for smoking-related illnesses since the military historically condoned and supported tobacco use.

CONCLUSIONS

Our qualitative analysis of the health-related content of this large and diverse group of VSO websites provides a very interesting picture how veterans' organizations prioritize health issues and potentially influence attitudes and practices of their constituent veteran and military communities. This type of study is consistent with recommendations by Ribisl,²⁶ who noted that research on tobacco content on the internet and websites is just emerging and that the first step is “to understand the nature of tobacco related internet content that is available (pp. i56). The most common health content on VSO websites was about issues related to Health Insurance/Tricare/VA, PTSD, disability/amputation/wounds, Agent Orange, TBI, GWS, and suicide.

It is not surprising that so many VSO websites contained information on insurance because many VSOs assist veterans with filing their claims and getting service-connection ratings for health problems or injuries they experienced while on active duty. In addition, PTSD, disability/amputations/wounds, GWS, TBI, illnesses associated with Agent Orange, and suicide are all significant health issues that can require extended treatment and health insurance coverage. They also are health care issues affecting military members and veterans who are still living and were active during conflicts in which the US has contributed significant military resources (e.g., Vietnam War, Gulf War I, Operation Iraqi Freedom, Operation Enduring Freedom).^{31–36}

Tobacco-related content was nearly non-existent on VSO websites and there were no mentions of smoking cessation. In fact, the only content that focused at all on the health effects of tobacco was the pamphlet on tobacco as a “gateway drug”, which was developed for youth and addressed how tobacco use could lead to use of other drug. This pamphlet, while useful and educational, was clearly not targeted to veterans. The lack of tobacco content is consistent with our content analysis of military installation newspapers, which found that only 6% of the 793 coded newspapers over one year contained any tobacco-

related articles.¹⁷ In fact, almost 10% of these newspapers carried tobacco ads which promote use.

It is puzzling that tobacco use and/or smoking cessation receives so little attention on VSO websites (and in military newspapers), particularly when compared to the coverage other health issues that are much less prevalent among both veterans and active duty military and the fact that both groups use tobacco at substantially higher rates than their non-veteran and non-military counterparts.^{3–5,37} For instance, rates of smoking among veterans are as high or higher than current PTSD rates among veterans across a number of conflicts.^{3–4,35,38–39} In addition, there is growing evidence that quitting smoking is more difficult for those with PTSD, individuals with PTSD smoke at higher rates than those without PTSD, and smoking may worsen some PTSD symptoms.^{40–42}

Given the significant impact of tobacco use on active military members and veterans,⁴³ and the fact that many VSOs support repealing the prohibition against service-connection for smoking-related illnesses since the military historically condoned tobacco use,⁴⁴ it is ironic that they provide little information about tobacco control or cessation on their websites. One possible explanation for the near absence of tobacco-related content on VSO websites might be related to VSOs supporting contradictory positions on tobacco, i.e., lobbying against efforts to raise tobacco prices or make settings smoke-free and supporting veterans 'right' to smoke, while at the same time arguing that tobacco-related illnesses should not be prohibited from service-connection and subsequent disability benefits.⁴⁴

Based on the information derived from our content analysis of VSO websites, we believe that VSOs could play a much more active and important role in addressing veterans' tobacco use and in military tobacco control. For example, VSOs already have been successfully engaged to improve community-based treatment for hypertension for older men.⁴⁵ The fact that VSOs have worked diligently to improve health services to veterans and that they often provide services assisting veterans with their claims is evidence they are focused on the health and well-being of their members. Thus, we suggest the following possibilities for VSO engagement to reduce tobacco use and the burden of smoking-related illnesses among veterans and to support tobacco control efforts in the military: 1) increase awareness of how veteran status (as a marker for military exposure) increases risk for both tobacco use and less cessation; 2) increase awareness among VSOs about how the tobacco industry targets the military and view veterans as a strong market for their product; 3) increase awareness of the long-term impact of tobacco on current and future VSO members (both to those receiving VA benefits and those without); 4) utilize veterans service officers to address tobacco use as peer interventionists with AD military leaving AD status and applying for VA benefits; 5) provide VSOs with training as smoking cessation peer interventionists for those that want to quit smoking; and 6) encourage VSOs to include smoking cessation materials on their websites as well as links to the respective state 1–800 quit-lines.

In summary, our website content analysis documented that VSOs provide very little information on tobacco-related topics on their websites and none offered any information about smoking cessation. Given the high rates of tobacco use among veterans and active duty service members and that veteran status also has been found to be associated with lower quitting rates, VSOs should consider making tobacco control and smoking cessation higher priority health issues, both on their websites and in general. VSOs historically have supported and fought for veterans health concerns for decades, so it would behoove them to now focus on smoking since it still is highly prevalent and leads to significant disease burdens that likely will not be allowed a service-connection rating, resulting in fewer benefits for VSO constituents.

SO WHAT?

What is already known about this topic?

US military veterans experience unique health issues resulting from their service. For example, tobacco use among veterans is higher than their non-veteran counterparts. VSOs represent veterans and their interests on a number of health and economic issues. However, little is known about VSOs' perspectives on veterans smoking or tobacco control in the military.

What does this article add?

To date, no systematic formative research has been conducted on the health concerns or issues prioritized by VSOs as part of their representation of US military veterans or their perspectives on military tobacco control or smoking cessation, despite the fact that smoking and smoking-related illnesses are still some of most significant health concerns facing veterans and the VA health care system. We conducted a content analysis of the health topics addressed by in a diverse sample of national VSO websites. Our data provide a unique glimpse into the health topics that are prioritized for coverage on VSO websites to their various constituencies.

What are the implications for health promotion practice or research?

VSO websites contain little information about tobacco control or smoking cessation. Given that VSOs play a strong advocacy role for veterans, we believe they also could be more active in addressing veterans' tobacco use and military tobacco control. VSOs work diligently to improve veterans' health services and provide services assisting them with claims. Thus, VSOs should be engaged to reduce tobacco use and the burden of smoking-related illnesses among veterans and to support tobacco control efforts in the military.

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Table 1

VSO Websites Meeting Inclusion Criteria.

	Organizations	URL Address
1.	Air Force Sergeants Association	http://www.hqafsa.org
2.	American Gold Star Mothers, Inc.	http://www.goldstarmoms.com
3.	American Legion	http://legion.org
4.	American Military Society	http://amsmilitary.org
5.	American Veterans (AMVETS)	http://www.amvets.org
6.	Disabled American Veterans	http://dav.org
7.	Fleet Reserve Association	http://www.fra.org
8.	Iraq and Afghanistan Veterans of America	http://www.iava.org
9.	Marine Corps League	http://www.mcleague.com/mdp/index.php
10.	National Coalition for Homeless Veterans	http://www.nchv.org
11.	National Gulf War Resource Center, Inc	http://www.ngwrc.org
12.	National Veterans Foundation	http://www.nvf.org
13.	National Vietnam Veterans Coalition	http://www.veterans-coalition.org
14.	The National Veterans Organization of America	http://www.nvo.org
15.	Retired Enlisted Association	http://trea.org
16.	Rolling Thunder, Inc.	http://www.rollingthunder1.com
17.	Veterans and Military Families for Progress	http://www.vmfp.org
18.	Veterans of Foreign Wars of the US (VFW)	http://vfw.org
19.	Veterans for Common Sense	http://www.veteransforcommonsense.org
20.	Veterans of Modern Warfare, Inc.	http://www.vmwusa.org
21.	Vietnam Veterans (Viet Now)	http://vietnow.com
22.	Vietnam Veterans of America	http://vva.org
23.	Women Veterans of America	http://www.wvanational.org
24.	Wounded Warriors	http://www.woundedwarriorproject.org

Table 2

Type and frequency of health issues addressed by each VSO website across content area/domain.

	Alcohol	Illegal Drugs	Directly Tobacco-Related	Indirectly Tobacco-Related	Smoking Cessation	Suicide	PTSD	TBI	Disability/Amputation/Wounds	GWS	Agent Orange	Exercise/Fitness	Weight/Body Composition	Health Insurance/TriCare/V.A	Pharmaceutical Formulary
Air Force Sergeants Association	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1
American Gold Star Mother, Inc	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
American Legion	0	1	2	0	0	2	4	4	4	3	4	0	0	7	2
American Military Society	0	0	0	0	0	0	0	0	0	0	1	0	0	3	0
American Veterans (AMVETS)	0	0	1	0	0	1	2	1	3	0	1	0	0	6	2
Disabled American Veterans	0	0	0	0	0	1	0	0	3	0	2	0	0	4	1
Fleet Reserve Association	0	0	0	0	0	1	2	1	2	1	3	0	0	5	1
Iraq and Afghanistan Veterans of America	1	0	0	0	0	2	2	2	2	1	0	0	0	4	0
Marine Corps League	0	1	0	0	0	1	1	1	2	0	0	1	0	3	0
National Coalition for Homeless Veterans	0	0	0	0	0	0	2	2	2	1	2	0	0	3	0
National Gulf War Resource Center, Inc	0	0	0	0	0	1	1	2	2	3	0	0	0	2	0
National Veterans Foundation	0	1	0	0	0	2	4	2	2	0	1	0	0	3	0
National Vietnam Veterans Coalition	0	0	0	0	0	0	2	0	0	2	3	0	0	3	0
The National Veterans Organization of America	0	0	0	0	0	0	0	0	0	0	1	0	0	5	0
The Retired	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0

	Alcohol	Illegal Drugs	Directly Tobacco-Related	Indirectly Tobacco-Related	Smoking Cessation	Suicide	PTSD	TBI	Disability/Amputation/Wounds	GWS	Agent Orange	Exercise/Fitness	Weight/Body Composition	Health Insurance/Tricare/VA	Pharmaceutical Formulary
Enlisted Association															
Rolling Thunder, Inc.	1	1	0	0	0	1	4	0	1	0	2	0	0	3	0
Veterans and Military Families for Progress	0	0	0	0	0	0	1	1	1	0	0	0	0	1	0
Veterans of Foreign Wars of the US (VFW)	0	1	0	1	0	2	2	2	1	4	3	0	0	6	1
eterans for Common Sense	0	0	0	0	0	0	1	1	0	1	0	0	0	1	0
Veterans of Modern Warfare, Inc	0	1	0	0	0	0	3	3	2	2	0	0	0	3	0
Vietnam Veterans (Viet Now)	0	0	0	0	0	0	3	0	1	2	3	0	0	2	0
Vietnam Veterans of America	2	2	0	0	0	2	4	0	1	1	3	0	0	4	0
Women Veterans of America	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0
Wounded Warriors	1	0	0	0	0	0	4	3	8	0	0	2	0	4	0
TOTAL *	5	8	3	1	0	16	43	25	37	21	29	3	0	78	8

* Total health topic mentions over all 24 VSOs = 277.

Table 3

Number of VSO’s addressing coded health topics in each website area/domain.

	Website Content Area/Domain									
Topic	About Us/ Mission	Resource/ PublicationDirectory	Member Benefits	News	Bylaws/ Constitution	Advocacy	Press Release	Issues/ Priorities	FAQ	
Number of VSO websites with this content area/domain	24	19	14	23	8	9	9	5	7	
Number of VSOs that addressed any health topic in this section N (%)	19 (79.2%)	15 (78.9%)	10 (71.4%)	19 (82.6%)	5 (62.5%)	8 (88.9%)	8 (88.9%)	5 (100.0%)	3 (42.9%)	
Number of VSOs that address each specific health topic in the respective website content area/domain*										
-Alcohol	0	2	0	0	2	0	0	0	1	
-Illegal Drugs	1	1	0	3	1	0	0	2	0	
-Directly Tobacco Related	0	1	0	1	1	0	0	0	0	
-Indirectly Tobacco Related	0	0	0	1	0	0	0	0	0	
-Smoking Cessation	0	0	0	0	0	0	0	0	0	
-Suicide	2	2	0	9	0	0	2	1	0	
-PTSD	6	9	0	15	1	4	4	2	2	
-TBI	2	4	0	12	0	2	4	1	0	
-Disability/Amputation/Wounds	6	7	1	10	1	4	5	2	1	
-GWS	4	6	0	6	0	2	1	1	1	
-Agent Orange	3	4	0	12	2	3	2	3	0	
-Exercise/Fitness	1	1	1	0	0	0	0	0	0	
-Weight/Body Composition	0	0	0	0	0	0	0	0	0	
-Health Insurance/Tricare/VA	17	11	9	20	1	6	7	4	3	
-Pharmaceutical Formulary	0	0	5	2	0	0	0	1	0	

* Note: Numbers (excluding percentages) represent the number of VSOs addressing each topic in the respective domains if they had that domain on their website and if any health topic was addressed.

Table 4

Keyword search of website resulting in any tobacco-related content.

VSO	Number of unique links*	Topics
Air Force Sergeants Association	None	None
American Gold Star Mother, Inc	None	None
American Legion	18	News stories on bans on tobacco use in public spaces, veteran smoking, the Navy's ban on smoking in submarines, DoD's efforts to reduce tobacco use, how deployment affects health where combat exposure was associated with greater risk of smoking, smoking as a risk factor for a disease or condition, and combining smoking cessation and PTSD treatment; VA report card highlighting smoking cessation counseling; smoking at Legion posts; and a number of biographical profiles smoking or smoking cessation was mentioned.
American Military Society	None	
American Veterans (AMVETS)	5	Meeting guidelines where smoking and drinking privileges are discussed; links to IRS forms where tobacco is mentioned (e.g., on the application for employer identification number, the need to file excise, alcohol, firearms, tobacco, and employment returns in mentions).
Disabled American Veterans	8	News stories and DAV documents supporting efforts to repeal the prohibition against service-connection for smoking-related illnesses; Service bulletins providing updates on studies examining the effects of deployment on veterans' health where tobacco use is one health issue affected by deployment; indirect references to tobacco and smoking in biographical stories
Fleet Reserve Association	2	Cigar advertisement, story on asbestos
Iraq and Afghanistan Veterans of America	18	Blog posts and daily briefs on the proposal for tobacco bans in the military and the Navy's ban on smoking in submarines, removing restrictions on family and friends sending tobacco products to deployed service members, DoD's position on not banning tobacco in war zones, the link between the smoking cessation aid Varenicline (Chantix) and suicidal thoughts, the association between PTSD and smoking; indirect references to smoking in the field, while on guard duty to combat boredom.
Marine Corps League	None	None
National Coalition for Homeless Veterans	None	None
National Gulf War Resource Center, Inc	3	Links to a Congressional testimony where not smoking is mentioned; a story about GWS where the term "smoking gun" is used.
National Veterans Foundation	None	None
National Vietnam Veterans Coalition	None	None
The National Veterans Organization of America	None	None
The Retired Enlisted Association	1	Link to Congressional testimony that addressed tobacco related illness and the need for tobacco settlement funds to be provided to the VA for since tobacco use was condoned and encouraged in the DoD historically.
Rolling Thunder, Inc.	None	None
Veterans and Military Families for Progress	None	None
Veterans of Foreign Wars of the US (VFW)	None	None
Veterans for Common Sense	6	Stories on the proposal to make the military smoke-free, a study examining cancer in the armed forces and particularly the relationship between smoking and cancer, DoD's position on not banning tobacco in war zones, the association between PTSD and heart disease and the role of tobacco use, the risk of depression facing combat troops that noted smoking as a depression risk factor, and the use of smoking to manage stress

VSO	Number of unique links*	Topics
Veterans of Modern Warfare, Inc	1	Story on DoD's position on not banning tobacco in war zones.
Vietnam Veterans (Viet Now)	None	None
Vietnam Veterans of America	7	Stories on diabetes among veterans and the role of smoking in increasing risk; Letters from members about the importance of smoking cessation and other health issues for saving lives; Official statement from VSO on Chantix and its association with suicide risk; Congressional testimony on the need for the VA to make smoking cessation an priority for veterans with COPD and making it a focus for preventive health, encouraging Congress to create a "Veterans Tobacco Trust Fund"; and a biographical story in which smoking is mentioned.
Women Veterans of America	None	None
Wounded Warriors	None	None

* Unique links were those that did not overlap with website content areas/domains previously addressed in Table 3.