

Virginia Management Fellows (VMF) Program

## **LIVED EXPERIENCE:**

### **A missing link in the creation of informed policy**

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Amending the Code of Virginia to Require Lived Experience (LE<sub>x</sub>)  
Representation and Compensation on State Boards and Councils

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## EXECUTIVE SUMMARY

Requiring Lived Experience (LEx) representation within state boards, councils, and committees is a fundamental way to utilize insight of “experts by experience”<sup>1</sup> to focus research and outcomes on “important issues and gaps”<sup>2</sup> communities are facing that may be overlooked without this unique perspective. Engaging individuals with LEx is also a proven way to reduce funding waste, particularly for health-related research, which has an estimated 85% of funding quantified as “wasted”<sup>3</sup> through factors such as failure to publish, unclear reporting, poor study designs, and “limited relevance to clinicians, patients, and end-users”.<sup>4</sup> All said factors can be addressed through the inclusion of individuals with LEx on state boards, councils, and committees, whether they are “advisory, policy-focused, or supervisory”<sup>5</sup>. Further, people with lived experience (PWLE) are represented in the four dimensions of key indicators of trust in qualitative research: credibility, transferability, dependability, and confirmability.<sup>6</sup> Integrating LEx representation into state boards, councils, and committees would therefore signal “genuine

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<sup>1</sup> Kim, C. (2025). The engagement of people with lived experiences in substance use research. *Frontiers in Public Health*, 13, 1611836. <https://doi.org/10.3389/fpubh.2025.1611836>.

<sup>2</sup> Donaghy, B., & Linkewich, D. (2024). Research imitates life: Researching within your lived experience. *Patient Experience Journal*, 11(2), 4–8. <https://doi.org/10.35680/2372-0247.1916>.

<sup>3</sup> Beames, J. R., Kikas, K., O’Grady-Lee, M., Gale, N., Werner-Seidler, A., Boydell, K. M., & Hudson, J. L. (2021). A new normal: Integrating lived experience into scientific data syntheses. *Frontiers in Psychiatry*, 12, 763005. <https://doi.org/10.3389/fpsy.2021.763005>.

<sup>4</sup> Beames et al., 2021, pp. 1-2.

<sup>5</sup> Boards and Commissions. (n.d.). VA Secretary of the Commonwealth. Retrieved May 15, 2026, from <https://www.commonwealth.virginia.gov/va-government/boards-and-commissions/>.

<sup>6</sup> Kim, 2025.

engagement and true power sharing”<sup>7</sup> which would strengthen the efficacy and outcomes of said groups.

This should be achieved through:

- A policy should be created to specify requirements of LEx representation in state boards, councils, and committees where the knowledge of people with LEx is applicable, whether this is in an advisory capacity, a policy-focused lens, or a supervisory capacity.
- This policy should also require state boards, councils, and committees to provide just compensation for participation. Said compensation should be codified as “excluded from income determination” or “excluded from eligibility determination”<sup>8</sup> as is applicable to government benefits to ensure participants are not at risk of benefit exclusion.

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<sup>7</sup> Lee, L. M., & Metzler, M. (2026). Engaging communities in public health practice: Lived experience or lived expertise? *International Journal for Equity in Health*, 25(1), 95. <https://doi.org/10.1186/s12939-026-02809-y>.

<sup>8</sup> *Community Compensation Guidelines* (pp. 1–40). (2023). Washington State Office of Equity. [Community-Compensation-PDF](#).

## SCOPE OF THE PROBLEM

The Commonwealth of Virginia has over 100 executive branch level agencies; within this hierarchy, there are roughly 300 state boards, councils, and commissions.<sup>9</sup> Responsibilities of said boards, councils, and commissions vary depending on their designation in the Code of Virginia, though they are categorized as advisory, policy-focused, or supervisory. Advisory boards serve as “liaisons between state agencies and the public, advising on public concern”; policy-focused groups “promulgate public policies and recommendations”; supervisory groups oversee agency operations, and ensure statutory directives are met.<sup>10</sup>

The Virginia Department of Social Services (VDSS) includes the Office of Trauma and Resilience Policy (OTRP), which focuses on the agency-wide implementation of trauma-informed and resilience-focused policies, working to create “safe, supportive systems that help prevent further harm and support healing”.<sup>11</sup> One aspect of pursuing trauma-informed policies revolves around Lived Experience (LEx) representation in state boards, councils, and committees. LEx is defined as “the knowledge a person gains from their own life, background, and personal story. It comes from firsthand experiences—such as being part of systems like child welfare, mental health care, or education—rather than from formal training or professional roles”.<sup>12</sup> Although there are over 300 state boards, councils, and committees in the executive branch of Virginia, less than twenty of these have an explicit requirement for Lived Experience

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<sup>9</sup> Secretary of the Commonwealth, 2026.

<sup>10</sup> (Secretary of the Commonwealth, 2026)

<sup>11</sup> *The Office of Trauma and Resilience Policy—Virginia Department of Social Services*. (n.d.). Retrieved April 23, 2026, from <https://www.dss.virginia.gov/trauma-and-resilience-policy/>.

<sup>12</sup> *Lived Experience Engagement—Virginia Heals* (n.d.). Retrieved April 23, 2026, from <https://virginiaheals.com/lived-experience-engagement/>.

(LEx) representation in the Code of Virginia, and even fewer have required compensation for members.

There is strength in researching within one's own area of lived experience, as is explored in the 2024 journal article by Donaghy and Linkiewich, which highlights that individuals with lived experience "have a unique insight into important issues and gaps that our communities are facing; thus, we can use our knowledge and experiences to focus our research on things that are important to the community".<sup>13</sup> Further, individuals with lived experience can provide valuable insight to other areas of research methods, such as processing analysis through a lived experience lens, and "helping with the inclusive design of lab-based quantitative studies or theme development in qualitative research"<sup>14</sup>. Beames et al. go further, asserting that the incorporation of lived experiences into mental health reviews and meta-analyses is "likely to improve the relevance and practical impact of the conclusions drawn".<sup>15</sup> Overall, researchers focusing on their own areas of lived experience, and individuals with lived experience being incorporated into research can help to "situate and provide a real-world perspective about the impacts of study findings"<sup>16</sup> making the research process and ultimate outcomes more significant.

Shifting from the researcher to a research perspective, integrating lived experience into research methods and processes could help reduce funding waste. An estimated 85% of funding for health research is "wasted";<sup>17</sup> with such waste including "failure to publish research, unclear reporting of research, and poor study design and conduct", further, "addressing research questions with limited relevance to clinicians, patients, and end-users is a key contributor to

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<sup>13</sup> Donaghy & Linkiewich, 2024, pp. 6.

<sup>14</sup> Donaghy & Linkiewich, 2024, pp. 6

<sup>15</sup> Beames et al., 2021, pp. 2.

<sup>16</sup> Donaghy & Linkiewich, 2024, pp. 6

<sup>17</sup> Beames et al., 2021, pp. 1-2; Kim, 2025, pp. 4

waste”.<sup>18</sup> Lived experience perspectives can be used to “collaboratively identify gaps or problem areas, formulate research questions, interpret empirical findings, comment on empirical gaps, evaluate what implications mean for them and whether they are practically relevant, and help to form a judgment about whether future research on a topic is worthwhile”.<sup>19</sup>

Engaging people with Lived Experience (PWLE) in governmental processes such as state boards, councils, and committees, enriches “the connection between the theoretical framework, knowledge translation, and practical application”<sup>20</sup> of the topic(s) being studied. The reinforcement of rigid knowledge hierarchies in research and the professionals in traditional, evidence-based medicine that purport them have been “called out for marginalizing PWLE”.<sup>21</sup> Incorporating PWLE in the research process “aligns with emancipatory methodologies” and reshapes “the process of knowledge creation and data analysis”<sup>22</sup> by challenging stigma and power dynamics, which can bolster the efficacy and potential impact of outcomes created through state boards, councils, and committees.

ASPE highlights the three levels lived experience representation benefits: benefits for individuals, programs and initiatives, and agencies alike.<sup>23</sup> The Center for Health Care Strategies, while focusing on strategies for state leaders to reform public behavioral health systems, makes the case for engaging people with lived experience in said reforms.<sup>24</sup> The brief

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<sup>18</sup> Beames et al., 2021, pp. 1-2.

<sup>19</sup> Beames et al., 2021, pp. 2-3.

<sup>20</sup> Kim, 2025, pp. 1-3.

<sup>21</sup> Kim, 2025, pp. 2.

<sup>22</sup> Kim, 2025, pp. 3.

<sup>23</sup> Assistant Secretary for Planning and Evaluation (ASPE). *What does it look like to equitably engage people with lived experience?* (pp. 1–5). (2022). [Equitable-Engagements-PDF](#).

<sup>24</sup> Engaging Community Members: A Guide to Equitable Compensation. (n.d.). Center for Health Care Strategies. Retrieved May 12, 2026, from <https://www.chcs.org/resource/engaging-community-members-a-guide-to-equitable-compensation/>.

asserts that “involving people with lived experience in policy and program development allows states to hear directly from community members about their experiences with the behavioral health system and challenges with accessing care”.<sup>25</sup> When people with lived experience are heard about the quality and access of their care in the process of reforming policy and practice, “it increases the likelihood that identified solutions will meet their needs”<sup>26</sup>

The following are the key benefits of “engaging people with lived experience in behavioral health efforts:

- Greater understanding of the significant challenges faced by disadvantaged groups when accessing the behavioral health delivery system.
- More responsive and equitable services, programs, and policies that meet the needs of affected communities.
- Better assessment of individuals’ experiences and satisfaction with behavioral health services and the impact of policies and programs from a community perspective.
- More trauma-informed practices and approaches to address discrimination and stigma.
- Improvement in individual engagement in services and supports”.<sup>27</sup>

PWLE are also represented in all four dimensions which are key indicators of trustworthiness in qualitative research: credibility, transferability, dependability, and confirmability<sup>28</sup> further reinforcing the strength of working with individuals with LEx. Conclusively, the recognition of lived experience by boards, councils, and committees would signal “genuine engagement and

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<sup>25</sup> Center for Health Care Strategies, 2026.

<sup>26</sup> Center for Health Care Strategies, 2026.

<sup>27</sup> Center for Health Care Strategies, 2026.

<sup>28</sup> Kim, 2025.

true power sharing”<sup>29</sup> which would strengthen the efficacy and outcomes of said groups, cut potential budgetary waste, and close the gap on important issues within communities that may not otherwise be recognized.

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<sup>29</sup> Lee & Metlzer, 2026, pp. 3-4.

## **POLICY ALTERNATIVES**

Referring to the Appendix Section, “Virginia Code Sections Which Require LEx Representation”, it is evidenced there are numerous versions of LEx requirements or references as seen in the code. These alternatives can be broken down into three categories: experiential participant, representative participant, and non-legislative participant representation. Experiential participants refer to those who have LEx within the topic of the board, council, or committee. Representative participants are meant to represent the interest of individuals in the context of the board, council, or committee. Non-legislative participants are in some cases classified as those with LEx, though it is technically not a direct requirement within the code.

The primary evidentiary language of required compensation in the code is capped at covering the cost of transportation, and in some cases, associated expenses. There is no standardized compensation model for those serving on state boards, councils, or committees whether they have LEx relating to their duties or not.

## POLICY RECOMMENDATIONS

A synthesized policy should be derived from the language that already exists in the Code of Virginia to specify requirements of LEx representation in state boards, councils, and committees where the knowledge of people with LEx is applicable, whether this is in an advisory capacity, a policy-focused lens, or a supervisory capacity.

This policy should also require state boards, councils, and committees to provide just compensation for participation, and consider multiple options for the method LEx participants receive compensation. In some cases, individuals with LEx will abstain from participating in such groups because receiving a direct payment for their knowledge could impact their reception of government benefits.<sup>30</sup> Therefore, the compensation LEx participants receive should be codified as “excluded from income determination” or “excluded from eligibility determination” as is applicable to government benefits.<sup>31</sup>

Finally, for lodging, meals, and mileage/travel costs, “Reimbursements can be made for lodging, meals, and mileage costs in addition to the compensation offered. When overnight stays are required, agencies” of said boards, councils, and committees “should try to book and pay for the hotel rooms on behalf of workgroup members to lessen the financial burden”.<sup>32</sup>

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<sup>30</sup> Langness, M., Cedano, S., Morgan, J., & Falkenburger, E. (2023). *Equitable Compensation for Community Engagement Guidebook* (pp. 1–13) [Guidebook]. Urban Institute. [Equitable-Compensation-PDF](#).

<sup>31</sup> Washington State Office of Equity, 2023, pp. 9-15.

<sup>32</sup> Washington State Office of Equity, 2023, pp. 26.

**Compensation Guidelines Based on The Code of Virginia**

<b>Role</b>	<b>Description</b>	<b>What They Do</b>	<b>Pay Range (VA) Per Hour</b>
Advisor	Provides information, feedback, and ideas related to a specific program, policy, or research area either as part of a group or as an independent consultant.	<ul style="list-style-type: none"> <li>- Informs committees, workgroups and advisory boards</li> <li>- Review and feedback of work products</li> </ul>	\$36–\$54
Data Analyst	Collects, cleans, and interprets data sets to answer a question or solve a problem.	<ul style="list-style-type: none"> <li>- Research and evaluation</li> <li>- Data analysis</li> </ul>	\$22–\$30
Leadership	Serves in leadership roles within organizations.	<ul style="list-style-type: none"> <li>- Acts as director/CEO of organizations that focus on or intersect with homelessness.</li> <li>- Organization management and coordination.</li> <li>- Serves on CoC Board</li> </ul>	\$30–\$47
Peer Mentor	Acts as a point person to help with questions, concerns, support, and regular, respectful check-ins for other PLEE.	<ul style="list-style-type: none"> <li>- Check-in facilitation</li> <li>- Mentoring and coaching other PLEE</li> <li>- PLEE-to-CoC liaison</li> </ul>	\$16–\$23
Staff	Works as a fully integrated member of the CoC/agency either as an employee or as a contractor.	<ul style="list-style-type: none"> <li>- Training and technical assistance</li> <li>- Grant monitoring</li> <li>- Research and evaluation</li> <li>- Project management and coordination</li> <li>- Mentoring and coaching other staff</li> </ul>	\$16–\$23
Storyteller	Shares insights and context about a problem or issue and educates outsiders about their cultural experiences and perspectives.	<ul style="list-style-type: none"> <li>- Running listening sessions</li> <li>- Conducting interviews</li> <li>- Shares public testimony</li> </ul>	\$36–\$54
Consultant	Collaborates on the creation, implementation, and oversight of products, programs, policies, practices, and services.	<ul style="list-style-type: none"> <li>- Training and technical assistance</li> <li>- Materials development</li> <li>- Research and evaluation</li> <li>- Consultation</li> </ul>	\$47–\$74

## APPENDIX

### Conceptualization of Research Processes Involving PWLE (Kim, 2025)<sup>33</sup>

TABLE 1 Conceptualization of research processes involving PWLE.

Research process	PWLE contributions
Research question development	<ul style="list-style-type: none"> <li>• Possess embedded knowledge, experience, and skills that researchers without similar backgrounds may lack</li> <li>• Ensure relevance, priorities, and real-world focus of research</li> <li>• Contribute with topics based on their lived experiences, including ideas that other researchers may not have considered<sup>1</sup></li> </ul>
Research design	<ul style="list-style-type: none"> <li>• Tailor interventions that are more inclusive and sensitive to the actual needs and preferences of end users</li> <li>• Develop products, treatments, or services collaboratively which tend to gain greater trust and have a higher likelihood of being embraced by the communities they are intended to benefit<sup>2</sup></li> <li>• Design research methods that are more likely to yield outcomes that have meaningful practical relevance and enjoy greater acceptance among the intended population<sup>3</sup></li> </ul>
Recruitment	<ul style="list-style-type: none"> <li>• Provide advice on effective and appropriate recruitment strategies and sample representativeness</li> <li>• As individuals who shared similar experiences, instilled trust in potential participants and increased recruitment numbers<sup>4</sup></li> </ul>
Data collection	<ul style="list-style-type: none"> <li>• Create ethically-safe data collection tools<sup>5</sup> that uphold participants' rights and dignity while minimizing potential harm throughout the research process<sup>13</sup></li> <li>• Made interviewees feel more comfortable than traditional researchers<sup>6</sup></li> <li>• Enhanced the clarity of the interview questions to participants and supported academic researchers in accurately understanding what the participants aimed to communicate<sup>7</sup></li> <li>• May use language that is understandable to everyone who is involved, thereby providing greater accessibility to the research than other healthcare professionals</li> <li>• Bring a heightened understanding of self-awareness that counteracts any personal biases<sup>11</sup></li> <li>• Can establish rapport with participants more easily, leading to richer, more nuanced data collection, as well as reduced potential for harm or discomfort during data collection<sup>12</sup></li> <li>• Involvement challenges stigma and shifts power dynamics, empowering individuals who have historically been marginalized or silenced in healthcare settings<sup>4</sup>.</li> </ul>
Data analysis	<ul style="list-style-type: none"> <li>• Contextualize data and interpret findings in ways that reflect real-world experiences and nuances, promoting credibility and maintaining grounding in reality<sup>8</sup></li> <li>• During coding, can identify patterns and themes that others may overlook due to their in-depth experiential knowledge</li> <li>• Confirm that research data align with actual participant experiences, thus increasing rigour<sup>9</sup></li> </ul>
Research outcomes	<ul style="list-style-type: none"> <li>• PWLE have a personal stake in the outcomes of their research, as the findings may directly impact themselves and their communities. This investment fosters a deep commitment to ensuring that research is conducted ethically and with the utmost care. The personal connection to the research topic also motivates PWLE to ensure that their work contributes positively to their communities</li> <li>• Question biases and assumptions, safeguarding results from overlooking the voices of participants<sup>10</sup></li> </ul>
Knowledge translation	<ul style="list-style-type: none"> <li>• Bridge findings with real-world applications based on their firsthand experiences</li> <li>• Contribute to wording that is understandable by those that will be most affected by the results</li> <li>• Disseminate knowledge in ways that are practical and applicable to target populations and real-world contexts</li> </ul>

<sup>33</sup> Kim, 2025.

**Virginia State Boards/Councils/Committees with LEx Requirements**

<b>Executive Agency</b>	<b>Board/Council</b>	<b>LEx Requirement</b>	<b>Basis</b>
DARS	Virginia Brain Injury Council	Yes, 50% members with a brain injury	ACL TBI Program (federal)
DMAS	Medicaid Advisory Committee & Beneficiary Advisory Council	Yes, meaningful beneficiary representation	CMS 2024 Access Rule
DHCD (via CoCs)	Continuum of Care Boards	Yes, at least one person with lived experience of homelessness	HUD CoC Rule
Virginia School for the Deaf and Blind	The Board of Visitors	Required	Code of Virginia
VA Department for the Blind and Vision Impaired	The Board for the Blind and Vision Impaired	Required	Code of Virginia
Office of Children’s Services	State Executive Council for Children’s Services	Required	Code of Virginia
Department for the Deaf & Hard of Hearing	Department Board	Required	Code of Virginia
VDH: Local Health Partnership Authorities	Board of Directors	No explicit LEx Requirement, but “sufficient citizen members” are mentioned in code.	Code of Virginia
DBHDS	State Board of Behavioral Health and Developmental Services	Yes	Code of Virginia
HHS	Virginia Board for People with Disabilities	Yes	Code of Virginia

DEQ	Virginia Council on Environmental Justice	Yes	Code of Virginia
Department of Corrections	The Corrections Oversight Committee	Yes	Code of Virginia
Virginia Department of Criminal Justice Services (DCJS)	Criminal Justice Services Board	Yes	Code of Virginia
Virginia Department of Veterans Services (DVS)	Joint Leadership Council of Veterans Services	Indirect yes, one representative from each qualifying service organization (technically representative participation)	Code of Virginia
DOLI	Safety & Health Codes Board – <a href="#">Code of Virginia</a>	No explicit LEx language, representative participations	Code of Virginia
Department of Conservation and Recreation	Select Programs within DCR – <a href="#">Code of Virginia</a>	No explicit LEx language, representative participations for Tribal Nations	Code of Virginia
Foundation for Healthy Youth	Representative Code Section – <a href="#">Code of Virginia</a>	No	Code of VA (non-legislative representatives but does not specify LEx)
Assistive Technology Loan Fund Authority	Representative Code Section – <a href="#">Code of Virginia</a>	No	Code of VA (non-legislative representatives but does not specify LEx)

VDSS	Lived Experience Advisory Groups (Speak Out, Parent Advisory Council)	No	Suggested agency practice
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**Virginia Code Sections Which Require LEx Representation**

**Virginia Brain Injury Council (DARS)** Under the Code of Virginia § 51.5-119 “DARS is designated as the state agency for coordinating rehabilitative services for people with significant physical or sensory disabilities, including brain injuries” (DARS, 2024). The Virginia Brain Injury Council is funded through the ACL TBI Program, which is a federal grant program “committed to integrating the voice of people with lived experience of TBI into its products, resources, and technical assistance approach” (Administration for Community Living, 2026). To utilize the grant funding, the council must have at least 50% of its participants be individuals with lived experience related to traumatic brain injuries.

**Department of Medical Assistance Services (DMAS):** The Medicaid Advisory Committee & Beneficiary Advisory Council has meaningful beneficiary representation under the CMS 2024 Access Rule, which aimed to “improve access to care and services for the people enrolled in the Medicaid program” (CMS Newsroom, 2024). This rule Requires states to establish a Beneficiary Advisory Council (BAC) comprised of Medicaid beneficiaries, their families, and/or caregivers” and, further, requires 25% of the Medicaid Advisory Committee members to be drawn from the BAC (CMS Newsroom, 2024).

**Department of Housing and Community Development (DHCD) (via CoCs):** Continuum of Care Boards are required to have at least one person with lived experience of homelessness

represented. The HUD CoC rule discusses the necessity of this as follows: “Per the CoC Program Interim Rule, a representative group of individuals from relevant organizations within a designated geographic area are to establish a CoC, and this CoC is entrusted to carry out the responsibilities outlined in Subpart B of the Rule. (24 CFR 578.5(a))” (HUD Exchange, 2026).

**Virginia School for the Deaf and Blind:** There is a statutory requirement that a portion of the governing board be composed of people with “lived experience” (in this case alumni who are deaf/hard of hearing, or vision impaired). Further, it is specified that “D. Legislative members of the Board of Visitors shall receive such compensation as provided in § 30-19.12, and nonlegislative citizen members shall receive such compensation for the performance of their duties as provided in § 2.2-2813” (Code of Virginia, 2026). Compensation wise, “All members shall be reimbursed for all reasonable and necessary expenses incurred in the performance of their duties as provided in §§ 2.2-2813 and 2.2-2825. Funding for the costs of expenses of the members shall be provided from such funds as may be appropriated to the Board of Visitors, in accordance with the appropriations act” (Code of Virginia, 2026).

**Virginia Department for the Blind and Vision Impaired:** “§ 51.5-61. Appointment, terms and qualifications of members of Board; eligibility for reappointment; quorum. The Board for the Blind and Vision Impaired is continued. The Board shall consist of seven members who shall be appointed by the Governor for terms of four years. No person shall be eligible to serve more than two successive terms, provided that a person heretofore or hereafter appointed to fill a vacancy may serve two additional successive terms. Vacancies occurring on the Board shall be filled by the Governor for the unexpired term. All appointments hereunder shall be made without reference to party affiliations, but solely on account of the fitness of the appointees to discharge their duties as members of the Board. The membership of the Board, however, shall at all times

include four persons who are blind. Four members of the Board shall constitute a quorum for the transaction of any lawful business. Annually, the Board shall elect one of its blind members as chairman, who shall preside at its meetings and shall have power to call meetings when he deems it advisable.” Members do not receive compensation for services or travel expenses (JUSTIA U.S. Law, 2025).

**State Executive Council for Children’s Services:** “B. The Council shall consist of one member of the House of Delegates to be appointed by the Speaker of the House and one member of the Senate to be appointed by the Senate Committee on Rules; the Commissioners of Health, of Behavioral Health and Developmental Services, and of Social Services; the Superintendent of Public Instruction; the Executive Secretary of the Virginia Supreme Court; the Director of the Department of Juvenile Justice; the Director of the Department of Medical Assistance Services; the Commissioner of the Department for Aging and Rehabilitative Services; a juvenile and domestic relations district court judge, to be appointed by the Governor and serve as an ex officio nonvoting member; the chairman of the state and local advisory team established in § [2.2-5201](#); five local government representatives chosen from members of a county board of supervisors or a city council and a county administrator or city manager, to be appointed by the Governor; two private provider representatives from facilities that maintain membership in an association of providers for children's or family services and receives funding as authorized by the Children's Services Act (§ [2.2-5200](#) et seq.), to be appointed by the Governor, who may appoint from nominees recommended by the Virginia Coalition of Private Provider Associations; a representative who has previously received services through the Children's Services Act, to be appointed by the Governor with recommendations from entities including the Departments of Education and Social Services and the Virginia Chapter of the National Alliance on Mental

Illness; and two parent representatives. The parent representatives shall be appointed by the Governor for a term not to exceed three years and neither shall be an employee of any public or private program that serves children and families. The Governor's appointments shall be for a term not to exceed three years and shall be limited to no more than two consecutive terms, beginning with appointments after July 1, 2009. Legislative members and ex officio members of the Council shall serve terms coincident with their terms of office. Appointments to fill vacancies, other than by expiration of a term, shall be for the unexpired terms. Vacancies shall be filled in the same manner as the original appointments. Legislative members shall not be included for the purposes of constituting a quorum.”

**Department for the Deaf & Hard of Hearing:** § 51.5-106. Board established; appointment, terms and qualifications of members; meetings; chairman. “There is hereby continued an Advisory Board, hereinafter referred to as the Board, for the Department for the Deaf and Hard-of-Hearing.

The Board shall be composed of nine members appointed by the Governor as follows:

Four representatives of deafness-oriented professions concerned with the health, education, rehabilitation, mental health and welfare of the deaf and hard-of-hearing; four citizens who are deaf or hard-of-hearing; and one member who is a parent of a child who is deaf or hard-of-hearing. Appointments shall be for terms of four years. No person shall be eligible to serve more than two successive terms, except that a person appointed to fill a vacancy may serve two additional successive four-year terms. The Board shall meet at the call of the Chairman, who shall be selected by the Board from among its membership, but no less than four times a year.

1984, c. 670, § 63.1-85.1:1; 2002, c. 747.”

**VDH, Local Health Partnership Authorities:** § 32.1-122.10:002. Board of directors; expenses; officers; terms of office; quorum; annual report. “A. All powers, rights and duties conferred by this article, or other provisions of law, upon an authority shall be exercised by a board of directors. The participating localities in the local health partnership authority shall determine the composition of the membership of the board. At a minimum, the board shall be composed of one locally elected official, one representative of the health care industry, one representative of the business community, and one representative of the nongovernmental human services agencies from each participating locality if such nongovernmental human services agencies exist; and, sufficient citizen members to constitute the majority of the board, who shall not be employed by, nor board members of, nor financially linked to the partnering agencies, groups and corporations involved.”

**State Board of Behavioral Health and Developmental Services (DBHDS):**

§ 37.2-200. State Board of Behavioral Health and Developmental Services.

“A. The State Board of Behavioral Health and Developmental Services is established as a policy board, within the meaning of § [2.2-2100](#), in the executive branch of government. The Board shall consist of nine nonlegislative citizen members to be appointed by the Governor, subject to confirmation by the General Assembly. The nine members shall consist of one individual who is receiving or who has received services, one family member of an individual who is receiving or who has received services, one individual who is receiving or who has received services or family member of such individual, one elected local government official, one psychiatrist licensed to practice in Virginia, and four citizens of the Commonwealth at large. The Governor, in appointing the psychiatrist member, may make his selection from nominations submitted by

the Medical Society of Virginia in collaboration with the Psychiatric Society of Virginia and the Northern Virginia Chapter of the Washington Psychiatric Society.”

**Virginia Board for People with Disabilities (HHS):**

§ 51.5-31. Board created. “There shall be a Virginia Board for People with Disabilities, responsible to the Secretary of Health and Human Resources. The Board shall be composed of 40 members, to include the head or a person designated by the head of the Department for Aging and Rehabilitative Services, Department for the Deaf and Hard-of-Hearing, Department of Education, Department of Medical Assistance Services, Department of Behavioral Health and Developmental Services, Department of Health, and Department for the Blind and Vision Impaired; one representative of the protection and advocacy entity; one representative of the university center for excellence in developmental disabilities; one representative each, to be appointed by the Governor, of a local governmental agency, a manufacturing or a retailing industry, a high-technology industry, a public transit interest, and a nongovernmental agency or group of agencies concerned with services for persons with developmental disabilities; a banking executive; one person with disabilities other than developmental disabilities; and 24 persons with developmental disabilities, parents or guardians of children with developmental disabilities, or immediate relatives or guardians of adults with cognitive developmental disabilities who cannot advocate for themselves. Of the last 24 persons, one-third shall be persons with developmental disabilities; one-third shall be a combination of (i) parents or guardians of children with developmental disabilities and (ii) immediate relatives or guardians of adults with cognitive developmental disabilities who cannot advocate for themselves; and one-third shall be a combination of (a) persons with developmental disabilities, (b) parents or guardians of children with developmental disabilities, and (c) immediate relatives or guardians of adults with cognitive

developmental disabilities who cannot advocate for themselves. At least one person shall be either (1) an immediate relative or guardian of a person who resides in or previously resided in an institution or (2) a person with a developmental disability who previously resided in an institution. Such persons shall not be employees of the Virginia Board for People with Disabilities or "managing employees," as defined by the Social Security Act (42 U.S.C. § 1320a-5), of any other entity that receives funds or provides services under Subtitle B of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (P.L. 106-402)."

**Virginia Council on Environmental Justice (DEQ):** § 2.2-2699.10. Membership; terms; quorum; meetings. "A. The Council shall have a total membership of 27 members that shall consist of 21 nonlegislative citizen members and six ex officio members. Nonlegislative citizen members shall be appointed by the Governor. The Secretaries of Natural and Historic Resources, Commerce and Trade, Agriculture and Forestry, Health and Human Resources, Education, and Transportation, or their designees, including their agency representatives, shall serve ex officio with nonvoting privileges. Nonlegislative citizen members of the Council shall be residents of the Commonwealth and shall include representatives of (i) American Indian tribes, (ii) community-based organizations, (iii) the public health sector, (iv) nongovernmental organizations, (v) civil rights organizations, (vi) institutions of higher education, and (vii) communities impacted by an industrial, governmental, or commercial operation, program, or policy.

Ex officio members of the Council shall serve terms coincident with their terms of office.

Appointments to fill vacancies, other than by expiration of a term, shall be for the unexpired terms. Vacancies shall be filled in the same manner as the original appointments. After the initial staggering of terms, nonlegislative citizen members shall be appointed for a term of four years."

## **The Corrections Oversight Committee (DOC):**

§ 53.1-17.3. Corrections Oversight Committee; membership; authority.

“A. There is created a Corrections Oversight Committee (the Committee) that shall consist of 13 voting members and two nonvoting members. Such voting members shall be appointed as follows: (i) two members of the Senate who are not members of the same political party, to be appointed by the Senate Committee on Rules; (ii) two members of the House of Delegates who are not members of the same political party, to be appointed by the Speaker of the House of Delegates; and (iii) the following nonlegislative citizen members to be appointed by the Governor: (a) one representative of a nonprofit prisoner advocacy group, (b) one representative of a nonprofit organization that provides training or rehabilitation programs for incarcerated inmates, (c) one male citizen and one female citizen who were formerly incarcerated within the Commonwealth for a term of imprisonment of three years or more within the 10 years immediately preceding his appointment, provided that such citizens have had their civil rights restored by the Governor, (d) one licensed physician, (e) one licensed mental health or behavioral health professional with experience providing mental health or counseling services to adults, (f) one person who is a grandparent, parent, child, sibling, or spouse or domestic partner of a person currently incarcerated within the Commonwealth and who is serving a term of incarceration of three years or more, (g) one current or former Department correctional officer in a supervisory role selected from an association of correctional officers and employees or a nonprofit organization in which he is a member, and (h) one current or former Department line correctional officer selected from an association of correctional officers and employees or a nonprofit organization in which he is a member. The two nonvoting members shall serve in an advisory role and shall consist of two current or former employees of the Department, a state

correctional facility outside of the Commonwealth, or a federal correctional facility who served in such role within the 10 years immediately prior to appointment. Upon the request of an inmate, an inmate's family member or representative, or a Department staff member, employee, or contractor who believes he may be the subject of retaliation for providing testimony or other information to the Office or the Committee, such nonvoting members shall be excluded from any investigations, inspections, interviews, receipt of testimony, or review of documents by the Office or the Committee with regard to the requester.”

**Criminal Justice Services Board (DCJS):**

§ 9.1-108. Criminal Justice Services Board membership; terms; vacancies; members not disqualified from holding other offices; designation of chairmen; meetings; compensation.

“A. The Criminal Justice Services Board is established as a policy board within the meaning of § [2.2-2100](#), in the executive branch of state government. The Board shall consist of 32 members as follows: the Chief Justice of the Supreme Court of Virginia, or his designee; the Attorney General or his designee; the Superintendent of the Department of State Police; the Director of the Department of Corrections; the Director of the Department of Juvenile Justice; the Chairman of the Parole Board; the Executive Director of the Virginia Indigent Defense Commission or his designee; and the Executive Secretary of the Supreme Court of Virginia. In those instances in which the Executive Secretary of the Supreme Court of Virginia, the Superintendent of the Department of State Police, the Director of the Department of Corrections, the Director of the Department of Juvenile Justice, or the Chairman of the Parole Board will be absent from a Board meeting, he may appoint a member of his staff to represent him at the meeting.

Twenty members shall be appointed by the Governor from among citizens of the Commonwealth. At least one shall be a representative of a crime victims' organization or a victim of crime as defined in subsection B of § [19.2-11.01](#), one shall be a representative of a social justice organization that is engaged in advancing inclusion and human rights, one shall be a mental health service provider, and two shall represent community interests, at least one of whom shall represent the community interests of minority individuals from one of the four groups defined in subsection F of § [2.2-4310](#). The remainder shall be representative of the broad categories of state and local governments, criminal justice systems, and law-enforcement agencies, including but not limited to, police officials, sheriffs, attorneys for the Commonwealth, defense counsel, the judiciary, correctional and rehabilitative activities, and other locally elected and appointed administrative and legislative officials. Among these members there shall be two sheriffs representing the Virginia Sheriffs' Association selected from among names submitted by the Association; one member who is an active duty law-enforcement officer appointed after consideration of the names, if any, submitted by police or fraternal associations that have memberships of at least 1,000; two representatives of the Virginia Association of Chiefs of Police appointed after consideration of the names submitted by the Association, if any; one attorney for the Commonwealth appointed after consideration of the names submitted by the Virginia Association of Commonwealth's Attorneys, if any; one person who is a mayor, city or town manager, or member of a city or town council representing the Virginia Municipal League appointed after consideration of the names submitted by the League, if any; one person who is a county executive, manager, or member of a county board of supervisors representing the Virginia Association of Counties appointed after consideration of the names submitted by the Association, if any; one member representing the Virginia Association of Campus Law Enforcement

Administrators appointed after consideration of the names submitted by the Association, if any; one member of the Private Security Services Advisory Board; and one representative of the Virginia Association of Regional Jails appointed after consideration of the names submitted by the Association, if any.”

**Joint Leadership Council of Veterans Services (DVS):** § 2.2-2681. Joint Leadership Council of Veterans Service Organizations; membership; terms; chairman; quorum; compensation.

“A. The Joint Leadership Council of Veterans Service Organizations (the Council) is established as an advisory council, within the meaning of § [2.2-2100](#), in the executive branch of state government. The Council shall be composed of one representative from each qualifying veterans service organization, to be appointed by the Governor, and the Commissioner of the Department of Veterans Services and the Chairmen of the Board of Veterans Services and the Veterans Services Foundation or their designees, who shall serve as nonvoting ex officio members. Each veterans service organization representative may designate an alternate to attend meetings of the Council in the absence of such representative.

Qualifying veterans service organizations shall be (i) composed principally of and controlled by veterans of the United States Armed Forces, (ii) a registered nonprofit organization in good standing, incorporated for the purpose of promoting programs designed to assist veterans of the armed forces of the United States and their eligible spouses, orphans, and dependents, and (iii) active and in good standing with its parent national organization, if such a parent organization exists.”

**Department of Labor and Industry (DOLI):**

§ 40.1-22. Safety and Health Codes Commission continued as Safety and Health Codes Board.

“(1) The Safety and Health Codes Commission is continued and shall hereafter be known as the Safety and Health Codes Board. The Board shall consist of fourteen members, twelve of whom shall be appointed by the Governor. One member shall, by reason of previous vocation, employment or affiliation, be chosen to represent labor in the manufacturing industry; one member shall, by reason of previous vocation, employment or affiliation, be chosen to represent labor in the construction industry; one member shall, by reason of previous vocation, employment or affiliation, be chosen to represent industrial employers; one member shall be chosen from and be a representative of the general public; one member shall be a representative of agricultural employers; one member shall, by reason of previous vocation, employment or affiliation, be chosen to represent agricultural employees; one member shall, by reason of previous vocation, employment or affiliation, be chosen to represent construction industry employers; one member shall be a representative of an insurance company; one member shall be a labor representative from the boiler pressure vessel industry; one member shall be a labor representative knowledgeable in chemicals and toxic substances; one member shall be an employer representative of the boiler pressure vessel industry; one member shall be an industrial representative knowledgeable in chemical and toxic substances, and the Director of the Department of Environmental Quality or his duly authorized representative shall be a member ex officio with full membership status. The Commissioner of Health or his duly authorized representative shall also be a member ex officio with full membership status.”

**Department of Conservation and Recreation (DCR):** § 10.1-104.02. Policies for consultation with federally recognized Tribal Nations in the Commonwealth.

“A. The Department, with assistance from the Ombudsman for Tribal Consultation designated pursuant to § [2.2-401.01](#), shall develop policies and procedures, to the extent permitted by law, to

ensure an opportunity for meaningful and appropriate written consultation with potentially impacted federally recognized Tribal Nations in the Commonwealth regarding certain major actions or permits issued by the Department. The Department shall designate an agency official to evaluate the adequacy of consultation and ensure that agency consultation practices are consistent. Actions and permits appropriate for consultation shall include the projects and actions set forth in subsection B. The policies shall define an appropriate means of notifying federally recognized Tribal Nations in the Commonwealth based on tribal preferences, ensure that sufficient information and time is provided for the federally recognized Tribal Nations in the Commonwealth to fully engage in consultation regarding the proposed action, and establish procedures for the Department to provide feedback to the federally recognized Tribal Nations in the Commonwealth to explain how their input was considered. Should feedback from the federally recognized Tribal Nations in the Commonwealth not be received by the deadline established in the Department's policies and procedures, the consultation provisions of this section shall be deemed fulfilled.

B. The following actions and projects are subject to consultation as set forth in subsection A: (i) cave collection permits, issued pursuant to the Cave Protection Act (§ [10.1-1000](#) et seq.), for permit applications pertaining to the study, extraction, or removal of any archaeological or historic feature in a cave in a locality identified by the Ombudsman for Tribal Consultation pursuant to subdivision B 2 of § [2.2-401.01](#) and (ii) Virginia-regulated impounding structures permits issued pursuant to 4VAC50-20-70 and 4VAC50-20-80 in a locality identified by the Ombudsman for Tribal Consultation pursuant to subdivision B 2 of § [2.2-401.01](#).”

**Department of Social Services (VDSS):** Lived Experience Advisory Groups “provide a formal way for people with firsthand knowledge to guide organizations” (Virginia Heals, 2026). The

formation of these groups is encouraged per agency practice, to “ensure services are better aligned with community needs and build greater trust with the people served” (Virginia Heals, 2026).

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