

PROPOSALS FOR IMPROVING THE REINTEGRATION PROCESS OF AMERICAN SOLDIERS

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Studies have consistently found high prevalence rates of veterans who experience difficulties reintegrating into civilian life, ranging between 50-61%. This paper assesses the current limitations of America's reintegration methods for military veterans. Commonly identified issues include difficulty finding employment, challenges with readjusting to daily life with family members, and stigma associated with seeking mental health services in military culture. This paper explores three proposals for how social workers can address these limitations in a way that would significantly improve veterans' reintegration processes. The first proposal aims to improve employment rates by creating a market economy exclusively for retiring service members. The second proposal aims to improve service members' ability to reintegrate with their family members by placing a stronger emphasis on this domain in the Transition Assistance Program, a mandatory program that all retiring service members must undergo before being discharged. The third proposal aims to increase veterans' use of mental health services by promoting the use of these services as early on as boot camp. By implementing these proposals, the United States could significantly reduce the prevalence rate of veterans who have difficulty reintegrating.

INTRODUCTION

“People are going to find this weird,
but I miss Iraq every single day.”

-Nicholas Johnson

Nicholas Johnson was a proud former specialist deployed to Iraq from 2006 until 2007. Today, he suffers from a broken back, “can’t get a good job,” and can’t “give [his] kid the life he deserves” (Flournoy, 2014). Scenarios like Johnson’s occur far too often. A study conducted by University of Southern California found that 61% of veterans have trouble adjusting to civilian life (Castro, Kintzle, & Hassan, 2015). Another study conducted by the *Washington Post* and Kaiser Family Foundation found that 50% of Iraq and Afghanistan veterans polled had difficulty transitioning back into civilian life (Flournoy, 2014). In addition, the United States Department of Veteran Affairs (VA) (2016) “estimates that Post Traumatic Stress Disorder (PTSD) afflicted 31% of Vietnam veterans.” Research is consistent with regard to the high prevalence of reintegration issues faced by veterans.

This article will propose ways to improve current strategies social workers and the military use to reintegrate service members into civilian life. More specifically, empirical research will be used to support proposals aimed at reducing both the severity and prevalence of issues accompanying reintegration. With such staggering prevalence rates, it is imperative that we address the factors that contribute to reintegration issues. Factors that contribute to veterans' reintegration are complicated by a variety of issues. Upon reintegrating, a service member is essentially changing not only his or her occupation, but also his or her daily routine, purpose in life, responsibilities, and much more almost overnight (Wegner, 2011). Social work initiatives combined with the military's involvement can substantially facilitate a smoother transition. This article will provide three proposals for social work initiatives that aim to improve the reintegration process of American soldiers.

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The reintegration process is complicated by many risk factors, such as the maladaptive use of alcohol and drugs (Wegner, 2011). Due to these risk factors, veterans are more at risk than the civilian population of severe legal and mental health consequences, ranging from incarceration to homelessness to suicide (Wegner, 2011). One study found that 96% of 754 veterans surveyed “expressed interest in services to re-adjust to civilian life” (Sayer, Noorbaloochi, Frazier, Carson, Gravely, & Murdoch, 2010, p. 589). With such a high demand for additional assistance from reintegration resources, it is imperative to evaluate the military's current reintegration process and its limitations.

HISTORICAL DEVELOPMENT

In order to understand the current limitations of the military reintegration processes, it is important to examine their historical development. The American military reintegration process has roots extending back to the Civil War (Rubin, Weiss, & Coll, 2013). However, mental health has only recently been considered an important part of reintegration efforts. In 1918, the Red Cross employed the first psychiatric social worker, but it wasn't until 1942 when the military “allowed service members to work as psychiatric social workers” (Rubin, Weiss, & Coll, 2013, p.5). This slow historic progress illustrates the delayed infusion of mental health services into the military. Cultural stigmas within the military that associate seeking mental health services with weakness further exacerbate the issue (Sharp et al., 2015). A meta-analysis found that a staggering 42.9% of service members surveyed about seeking mental

health assistance did not do so because they “might be seen as weak” (Sharp et al., 2015, p.144). While progress in combating this stigma is slow, modern advances, such as a push to hire more mental health professionals and train them to treat common issues that veterans face (e.g., traumatic brain injury and PTSD), have a greater impact on infusing mental health care into reintegration services (Munsey, 2007).

Another significant factor that has historically affected reintegration is the relationship between veterans and their family members (Rubin, Weiss, & Coll, 2013). The military has come to realize the importance of maintaining a healthy family dynamic for service members, as it directly affects both soldiers’ mission performance and their reintegration process (Rubin, Weiss, & Coll, 2013). While it is understood that families play a vital role in every service member’s life, society has long failed to acknowledge the lasting impacts of service on family members. Service members’ deaths and injuries can have lasting emotional and financial consequences for families. Early organizations launched initiatives towards improving family dynamics. The American Red Cross, empowered by social workers, strongly pushed for family care services as early as 1917. During World War II, there was an expansion of military family programs, including the Emergency Maternal Infant Care program, due to the large number of young, self-supporting women serving in the military. The Air Force Aid Society, a U.S. Air Force operated charity that provides services such as loans and base community programs for service members and their families, was established in 1942 (Rubin, Weiss, & Coll, 2013). Family care has grown to play an important role in military reintegration initiatives today (Albano, 1994). Throughout the history of the United States military, mental health services and family care services have developed into important aspects of the reintegration process for service members.

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IMPLICATIONS FOR SOCIAL WORKERS

Social workers who serve veterans have the potential to further enhance reintegration methods by improving upon the military’s current mental health and family care services. From a clinical perspective, social workers have the skill set to administer a wide range of therapeutic treatments that combat minor to severe mental health issues. Issues facing service members can range from mild depression to severe PTSD (National Veterans Foundation, 2016). In addition, social workers are trained to assess clients from a multifaceted perspective, thus creating a holistic

picture of the micro and macro factors that impact an individual, such as family dynamics (micro) or governmental policies (macro). Furthermore, social workers are proficient in advocating for the services veterans desire, deserve, and require. Social workers in the military should play a critical role in improving current reintegration methods as they are trained to advocate on behalf of their clients and clinically treat their clients' internal and external stressors.

THE CURRENT AMERICAN REINTEGRATION PROCESS

In order to examine how social workers and the military can have a positive influence on the veteran reintegration process, it is necessary to examine the military's current initiatives and their shortcomings. There are a number of military-operated transition programs—including the Transition Assistance Program (TAP), the Disabled Transition Assistance Program (DTAP), Wounded Warriors, and the System Care Department—within the VA (Koeman, 2008). TAP and DTAP take a proactive approach by providing veterans with “employment assistance and training information within 180 days of separation from the military service” (Rubin, Weiss, & Coll, 2013, p. 282). These programs offer benefits such as “access to family support services, veteran health care benefits, home loans, home care, vocational rehabilitation, and assistance with job searching” (Rubin, Weiss, & Coll, 2013, p. 283). These programs are designed to be accessible and effective in reintegrating all separating service members.

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The Veterans Opportunity to Work and Hire Heroes Act of 2011 (VOW Act) mandates that all retiring service members must attend the TAP training so that they are aware of these readily available resources (Guina, 2012). Furthermore, the Department of Defense created a virtual TAP curriculum online so that this compulsory reintegration assistance program can be more accessible. TAP's curriculum consists of a five-day workshop, with optional additional days depending on personal interests. The first three days are dedicated to “going over personal finances, family adjustments, VA benefits, and mentorship.” The following two days are dedicated to job preparation services (Department of Labor, 2002).

In addition to the TAP program, additional factors for successful reintegration of military members include the use of obligatory pre and post psychological screenings and information sessions (Rubin, Weiss, & Coll, 2013). Higher education is also made more accessible by the Post-9/11 GI Bill, which provides “substantial financial packets for veterans to attend college” (Rubin, Weiss, & Coll, 2013, p. 289). These resources, coupled with

the mandatory policy safeguards, are some of the major ways in which the military currently attempts to successfully reintegrate veterans back into civilian life.

LIMITATIONS

While the resources offered by the military help veterans successfully adjust to civilian life, there are still many limitations and complications that limit the military's role in reintegration. More specifically, as time elapses, the family, service member, and the surrounding environment have often drastically changed from the way they functioned prior to military service (Marek et al., 2016). Feelings such as resentment, frustration, and indifference can decrease a veteran's desire to effectively reintegrate into civilian life (Wegner, 2011). The abundance of resources provided by the military are useless if individuals are so overwhelmed that they do not take advantage of these opportunities. The military's ability to successfully reintegrate service members is limited and complicated by the individual's willingness to accept help.

Another major limitation concerns employment. There are many ways employers can circumvent laws that prohibit discrimination against physical and mental disabilities (Flournoy, 2014). While being interviewed by the *Washington Post*, Nicholas Johnson stated, "to fill out a [job] application I have to be upfront and say I have a torn up back" (Flournoy, 2014). Despite his transferable leadership skills gained abroad, the factories in Topeka continue to deny him the opportunity to work (Flournoy, 2014). Discrimination against physical disabilities is just one factor that inhibits veterans' ability to effectively transition back to civilian life. Mental disabilities acquired in the course of duty are the invisible wounds that society does not see, acknowledge, or adequately account for (Flournoy, 2014). According to Johnson, "between the pain injury from his back and, the God knows, the torment from PTSD, you don't necessarily look the part, but you still suffer and your life is changed" (Flournoy, 2014). Johnson's story is only one of many examples in which, despite the numerous employment and reintegration resources available, veterans who have put their life on the line for freedom are still denied access to fair employment opportunities.

PROPOSALS TO IMPROVE THE AMERICAN REINTEGRATION PROCESS

Now that some of the most pressing issues with the nation's current reintegration programs have been identified, the following section will describe three proposals targeting a more effective reintegration process in the following domains: a veteran's career, family life, and mental health. Throughout these proposals, the specific roles social workers would play in

each scenario will be highlighted. These three domains have been selected because they are areas in which current reintegration methods do not adequately provide assistance.

A PROPOSAL FOR A VETERAN EXCLUSIVE MARKET ECONOMY

The first proposal concerns how to improve veterans' ability to find employment after retiring from the military. For many veterans, managing physical and mental injuries, experiencing rapid cultural changes, and going from an active duty service membership to being unemployed can be very difficult (Rubin, Weiss, & Coll, 2013). The military should create a large number of jobs in a variety of fields exclusively for veterans. While the VOW Act does allow preferential hiring for veterans in federal positions, there are no government initiatives aimed at hiring or reserving positions only for veterans (Guina, 2012). In addition, a significant limitation to this act's preferential hiring process concerns the fact that many federal positions are already highly sought after by the civilian population.

In this proposal to create a veteran market economy, social workers would serve as advocates and supportive resources for veterans in both seeking and maintaining a job. Employment opportunities could range from low-skilled jobs to high-skilled jobs, physically demanding to non-physically demanding, etc. By creating a marketplace hiring only previous military personnel, career opportunities would be guaranteed and culture shock would be reduced, as all coworkers would also be veterans. Physical and mental impairments could be properly addressed by social workers providing assistance. Perhaps the biggest disadvantage of this proposal is that it would require an extreme initial overhaul in military budgeting. Furthermore, institutions that would house these jobs would have to be developed. However, if the government can spend \$718 billion on "defense and national securities initiatives" in 2011 alone, the military should at least be able to spend an equal amount on ensuring that veterans have a sustainable job following their service (Plumer, 2013). In addition to fulfilling moral obligations, this new marketplace would eventually generate substantial revenue for the American economy as a result of a larger number of veterans contributing to the gross domestic product. Social workers would play vital roles in this initiative, as advocacy and support services are critical components of the plan's success.

A PROPOSAL FOR EMPHASIZING FAMILY REINTEGRATION IN THE TAP PROGRAM

The next proposal attempts to facilitate the reintegration of veterans in family life. As mentioned earlier, TAP does provide family support services (Rubin, Weiss, & Coll, 2013). However, word “family” is not mentioned in the entire TAP manual’s Table of Contexts (Department of Labor, 2002). Reintegrating service members into their families deserves far more attention than it currently receives.

TAP’s mandatory training should be redesigned by social workers to help veterans develop critical skills that would assist in creating healthier relationships with their families. These skills include, but are not limited to, techniques aimed at improving coping mechanisms, stress management, and other emotional and behavioral based assets. Social workers would also play a vital role in personally helping veterans develop these skills. In addition, the TAP program should be extended to be longer than five days in order to provide veterans with a greater amount of time to develop these critical skills. Extending the duration of this program would also allow veterans to receive continuous support in family life, as well as other domains. Disadvantages of this proposal include veterans possibly not wanting to undergo a longer mandatory program, additional costs for ongoing treatment, and a huge design overhaul of the TAP initiative. Despite these disadvantages, these program adjustments would place a more appropriate focus on preparing veterans to reintegrate with their loved ones while obtaining ongoing support and working towards self-improvement.

A PROPOSAL FOR DESTIGMATIZING MENTAL HEALTH

The last proposal attempts to significantly reduce mental health injuries sustained from service, thus improving upon veterans’ overall reintegration process. The phrase “mental health,” or any synonym, is also not mentioned in the Table of Contents section of the TAP Manual (Department of Labor, 2002). The TAP Manual should be revised by social workers to incorporate mental health as an integral part of reintegration service.

In order to reduce mental health issues during reintegration, it is necessary to change the way the military has long stigmatized mental health (Acosta et al., 2014; Kime, 2015). While the stigmas surrounding mental health issues are decreasing, the rates at which barriers are being broken down are far too slow (Kime, 2015). Strategies aimed at reducing mental health stigma

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must begin during a service members' earliest phase of training (i.e., boot camp), thus destigmatizing mental health issues from the beginning of a service member's career. It is hypothesized that an introductory program that emphasizes the importance and acceptability of mental health support would decrease the development of mental health issues during and following active duty services. Challenges facing this proposal include the deeply rooted negative associations mental health has in the military and securing additional funding for these programs (Sharp et al., 2015). Nevertheless, no price exceeds the importance of maximizing service members' mental health during and following their service.

CONCLUSION

Proposals for addressing the needs of veterans have been articulated and examined for strengths and weaknesses, and the roles of social workers in these proposals have been thoroughly discussed. Based on this assessment and supporting literature, the advantages of these proposals appear to outweigh the disadvantages. These proposals possess the potential to have a significant impact on service members' reintegration processes.

Today, Nicholas Johnson continues to work at an unfulfilling job, suffer from severe PTSD, and experience difficulties within his family dynamic (Flournoy, 2014). He and many other veterans like him deserve far better than the existing reintegration resources. The proposals discussed in this article would begin to address the current service limitations that affect veterans who struggle with reintegration. Through a market economy that exclusively hires veterans, veterans would be able to more seamlessly find suitable employment following discharge. Through a redesign of the TAP program, veterans will be better prepared to reacclimate to civilian life, particularly healthy family functioning. Through efforts to destigmatize mental health within the military community, service members and veterans would experience increased quality of life. In conclusion, these proposals have the potential to improve veterans' quality of life by creating appropriate employment options, improving care for veterans and their families, and beginning to create a military culture that values mental health as much as physical health.

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