2019

Influence of Combat Veterans' Attitudes and Behaviors on Community Reintegration

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Abstract

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Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

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Abstract

A civil-military divide exists within the United States and is perpetuated by a distinct lack of communication between the civilian and military sectors within the population. The purpose of this correlational study was to examine whether attitudes and behaviors of combat veterans affect their positive reintegration into civilian communities. Binder's social ecology theory provided the framework for the study. Data were collected from 255 combat veterans who responded to a survey. Results were analyzed using a hierarchical multiple linear regression model to determine the influence of military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement on community reintegration efforts, while controlling for age, branch of military service, place of residence, political party affiliation, education, rank, reason for ending military service, and sex. There were statistically significant results that indicate prediction for successful community reintegration may be dependent upon the identification of key associations, including post-deployment support, education, rank, and the reason an individual transitioned out of military service. Findings may also provide policymakers with information about the community reintegration process, which may be used to improve reintegration efforts of combat veterans transitioning back to civilian life for positive social change.

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Dedication

This dissertation is dedicated to the memory of my beloved Grammy, Kay Escolas, who always inspired my love of reading, writing, and research as I was growing up. I would always send her my papers up to the final chapters of this dissertation for a common-sense check, if nothing else. I will miss my greatest advocate, but I know that she is in a better place. Thank you for all that you have done for me.

Acknowledgments

First and foremost, I would like to thank my family for the support, patience, and grace they have shown me throughout this endeavor. My children, Alexander and Natasha, had never known a time when I was buried in some type of research or writing assignment. My mom, Dr. Deborah Shearin, was always willing to read my papers or give me some of her time to work through my latest obstacle. My grandfather, Louis Escolas, always knew I could do better, and my aunt, Dr. Sandra Escolas, showed the way.

Additionally, I would like to thank my committee chair, Dr. Karel Kurst-Swanger, and second committee member, Dr. Richard DeParis, for their knowledge and guidance throughout this process. I am very thankful that they took the time to keep me focused on the finish line.

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Chapter 1: Introduction to the Study

In 2014, the United States initiated a large-scale force reduction of its military unseen since the early 1990s following the end of the Cold War. After 10 years of war, the U.S. government found that the financial impact of long-term warfare was detrimental to the domestic needs of a country in an economic downturn, not because of dwindling public support (Friedman & Logan, 2012). The abrupt change created shockwaves throughout the nation, impacting the military community of active and veteran members, their families, and the country at large with an influx of combat veterans reentering civilian communities without the necessary infrastructure to meet their needs.

The U.S. military needed to find a balance between the harsh reality of its economy and the costs incurred to support the social contract made with its military personnel of care after service (Fisher, 2014). President Abraham Lincoln's second inaugural speech described the commitment of the United States to its veterans: "To care for him who shall have borne the battle and for his widow, and his orphan" (as cited in Sigford, 2008, p. 160. The down-sized personnel served in a war-time military and had earned the right of support as they fulfilled their part of the reciprocal obligation implicit within the social contract. Transitioning these individuals from the military reduced the U.S. defense budget through lower personnel costs. However, the Department of Veterans Affairs (VA) health care system lacked a robust infrastructure, and veterans may not have had easy access to services. This organizational gap transferred a great amount of responsibility for veteran care to an unprepared domestic infrastructure where

the civil-military gap continues to hinder successful reintegration (Collins, Wilmoth & Schwartz, 2013).

Successful reintegration requires individual readjustment, access to health care, and community integration. The individual veteran's identity embeds itself within each of these components, which influences the veteran's attitudes and behaviors throughout the reintegration process (Fordham, 2016). Recent literature suggested that civic engagement enables an individual to create a positive sense of identity (McAllum, 2014). However, little is known about the effectiveness of civic engagement as it relates to reintegration efforts of combat veterans, or how veterans' attitudes or civic engagement behaviors influence reintegration. Civic engagement includes, but is not limited to, volunteering, political participation, and involvement in community-level activities (Lawrence & Matthieu, 2017).

Civic engagement may build a bridge to address the civil-military divide and provide an avenue for the positive expression of ideas and experiences incurred during military service. This chapter provides the background of the study, the problem statement, the purpose of the study, the research question and hypotheses, the theoretical framework, the nature of the study, key definitions, assumptions, scope and delimitations, limitations, as well as the significance of the study.

Background

The United States, as well as many other Western countries, struggle with the reintegration of veterans. This remains true even after over a decade of war in the Middle

East. The U.S. large-scale force reduction in 2014 complicated this issue further and shifted the responsibility of reintegration to the civilian communities (Lytell et al., 2015). This created a situation in which veterans, as well as communities, labored to adjust to the new normal with the limitation of the misperceptions created by the civil-military divide, which exacerbated the situation (K. E. Miller, Finn & Newman, 2014).

The development of a military culture created the civil-military divide as the self-selected volunteers shared an environment, experiences, and worldview separate from their civilian counterparts (Davidson, 2013). Reintegration requires both sides of the civil-military divide to overcome the lack of shared understanding and experiences as well as stereotypes promulgated by misinformation (Osborne, 2013). Recent research indicated that the unique military culture has gained national attention and has been added as a dimension of cultural awareness that must exist in a cosmopolitan area due to the individual needs of the military community (Meyer, Writer, & Brim, 2016). This includes the health care industry, community activities, researchers, and veterans and their families (Hawkins, McGuire, Linder, & Britt, 2015).

Approximately 800,000 veterans who served during the era of the Iraq and Afghanistan combat operations have settled throughout the nation (Doyle & Streeter, 2016). However, research indicated that appropriate understanding of the unique cultural needs of veterans and their families may not exist unless they moved into communities outside of military bases (K. E. Miller et al., 2014). K. E. Miller et al., (2014) found that over half of their study's participants of health care professionals self-reported

information gaps regarding treatment for unique issues that military veterans or their families might have other than post-traumatic stress disorder (PTSD). This presents a challenge for the already strained U.S. health care system as education and training must be provided to address this concern and may have a detrimental impact on the reintegration efforts of veterans (Collins et al., 2013).

Another complication for reintegration efforts is that it does not exist as a steady state of being with a definite timeline, but as a fluid process that is distinctive to each veteran and his or her family (Elnitsky, Blevins, Fisher, & Macgruder, 2017). Within this process, there are five interrelated domains of reintegration that either facilitate or hinder a veteran's ability to adjust to the new reality of becoming a civilian: physical health, psychological health, employment, finances, and housing (Elnitsky et al., 2017). The success of reintegration depends on the level of social support as well as the personal attributes of the veteran (Hawkins et al., 2015).

Identity serves as the most critical aspect of personal attributes of the veteran within the reintegration process, and transitioning into or out of service is generally a voluntary move (Hawkins et al., 2015). However, force reduction and injuries sustained during wartime remove veterans' control of their obligation of service time. Many of these veterans are subjected to involuntary separation from the military, and this has reverberating consequences for the veterans' sense of self (Hawkins et al., 2015). Additionally, the sense of being a burden may hinder veterans' ability to seek help or reconnect with their families and communities (Elnitsky et al., 2013).

Social support functions as another crucial element of reintegration. This includes family and the community. Research indicated that civic engagement may provide an avenue to build positive connections and improve physical and mental health (Jenkinson et al., 2013). Social support allows for a sense of belonging to something more significant than the individual, which is a vital feature of the military identity (Demers, 2013). Volunteering provides the veteran with an opportunity to aid the community by solving a problem, which engages several elements of cognitive-behavioral therapy (Tenhula et al., 2014).

However, researchers have not examined the relationship between civic engagement and veteran reintegration. Addressing this oversight may help improve a veteran's sense of identity by providing a venue to express ideas and experiences positively and meet the needs of the community. This may help eliminate the feeling of being a burden and may bridge the civil-military gap through communication and a visible presence in the community.

Problem Statement

Stereotypes exist within the United States regarding the growing civil-military gap and are a consequence of having an all-volunteer military (Smith & True, 2014). Some of these stereotypes include that most people involved with the military are politically conservative, gun-toting individuals who have PTSD, or that all civilians have no understanding of the world outside their country. These stereotypes emerged through historical perspective, the societal impact of the Vietnam conflict, and the removal of the

draft by the United States in 1973 (Bristol & Stur, 2017). Misperceptions influence the attitudes and behaviors of both sides of the civil-military divide, and create a communication barrier that may hinder successful reintegration of combat veterans.

A shift in public perception occurred following the attacks on September 11, 2001; however, the social and emotional distance between the civilian and military sectors remained exacerbated by the increasing homogenous composition of the military (Nteta & Tarsi, 2015). After those attacks, the U.S. military served in a wartime setting with the expectations of serving in a combat zone, higher operations tempo, and the knowledge that the time and distance from loved ones have an impact on more than just the service member (MacDermid Wadsworth, Bailey, & Coppola, 2016). However, the process of reintegration of service members after a combat deployment has been found to be complex due to the conflict of identities and needs of all individuals involved (Ahern et al., 2015; Walsh & Nieves, 2017). Different methods such as classes, marriage and family retreats, and vacation time have been used to negate some of the more harmful events that may occur during post-deployment reintegration, including suicide, vehicular accidents, and domestic violence (Ramchand, Rudavsky, Grant, Tanielian, & Jaycox, 2015).

However, the reintegration process does not occur only once for service members; the process must be transmutable for the complex and unique needs of all individuals involved. Many service members served in a combat zone more than once and transitioned back to the civilian community multiple times (MacGregor, Heltemes,

Clouser, Han, & Galarneay, 2014). Reintegration research focused on the short-term nature of these efforts due to the high number of times an individual may experience the need for reintegration as well as to meet the needs of a wartime military. This short-term focus led to an emphasis on pilot studies and a limited number of intervention studies to understand this phenomenon (Elnitsky et al., 2017). Reintegration has been found to be an individual's progression toward adaptation instead of a steady state that everyone follows (Elnitsky et al., 2017). Few studies have addressed the long-term reintegration efforts of veterans. These individuals must traverse the social distance and develop a new identity that exists outside of the familiar narratives of hero, victim, or villain (Hines, Gribble, Wessely, Dandeker, & Fear, 2014).

Reintegration efforts can become stymied if these familiar narratives dominate the perceptions of the individual or the social support network, which adds a greater time requirement to successfully transition into the civilian sector (Smith & True, 2014). Identifying factors that can enable successful transition within the reintegration process was warranted. The current study was intended to fill a gap in the literature through examination of the role of civic engagement as a method of successful long-term reintegration of veterans into the community at the end of their service.

Purpose of the Study

The purpose of this cross-sectional quantitative study was to test the theory of social ecology that describes the interdependent relationship between an individual and the community. This was accomplished by studying the influence of civic engagement on

combat veterans' reintegration efforts using online, close-ended, survey methods. I controlled for age, branch of military service, place of residency, political party affiliation, rank, reason for ending military service, and sex. The dependent variable, community reintegration, was defined as the level of interdependence of the participant within the community. This level was determined by the overall score of the individual based on a civic engagement scale. The civic engagement scale is part of the European Social Survey (ESS) that examines five social domains to determine the level of social capital individuals have invested in their community, and two of these domains were used for the civic engagement scale (see Jowell, Roberts, Fitzgerald, & Eva, 2007).

The independent variable of military job satisfaction was defined as the participant's perception of approval and likelihood to recommend the profession to others. Job satisfaction was determined by the overall score of the individual based on the Military Job Satisfaction Scale, which was adapted from the Facet-Free Job Satisfaction Index developed by Quinn and Mangione (1973) and later used by Sanchez, Bray, Vincus, and Bann (2004) as a means to measure military job satisfaction. The independent variable of post-deployment stressors was defined as the exposure to stressful life events that may have occurred following the participant's deployment to a combat zone. Post-deployment stressors level was determined using the Post-Deployment Life Events Scale developed by Vogt et al. (2013).

The control variables were identified from Sanchez et al.'s (2004) study of job satisfaction in the military. The control variable of age was defined as individuals age

when the individual participated in the study. The control variable of time since service was defined as the years since the individual left military service. The control variable of branch of military service was defined as one of the five branches of military service recognized by the U.S. military as well as Active Duty, National Guard, or Reserve commitments. The control variable of place of residence was defined as the current location of the participant. The control variable of political party affiliation was defined as the political party an individual self-identified on the voter registration form. The reason for ending military service was defined as the principal factor in the determination for leaving military service. Education was defined as the level of education an individual had completed. Rank was defined as the highest promotion grade an individual achieved while in military service. Sex was defined as the gender identity of an individual. Race was defined as one of the seven races acknowledged by the U.S. military. Time in service was defined as the length of time an individual spent while in military service.

Research Questions and Hypotheses

In this cross-sectional quantitative study, I examined the impact of military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement on the reintegration efforts of combat veterans by looking at two facets of attitudes and behaviors and a split focus on the past and present regarding these same two facets. Four instruments were included in a single online, close-ended survey as a means to measure the variables of the study: The Facet-Free Job Satisfaction Index was used to measure military job satisfaction, the Post-Deployment Life Events was used to measure after

deployment of stressor exposure, the Post-deployment Support Level was used to measure acknowledgement of support systems following a deployment, and the ESS Questionnaire was used to measure civic engagement and the dependent variable of community reintegration (see Obeid, Gitelman, & Baron-Epel, 2014; Quinn & Mangione, 1973; Resnik, Plow, & Jette, 2009; Vogt et al., 2013).

The U.S. military initiated a large-scale force reduction in 2014 that significantly increased the number of individuals engaging in reintegration efforts throughout the country. Previous researchers had sought to identify positive factors that improve reintegration efforts for veterans, but researchers had not considered the impact of civic engagement on these efforts or how individuals perceive their military service once their military service is terminated. The current study addressed one central research question (RQ) to contribute to the existing literature and build on veteran policy research:

RQ1: Do military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

To address RQ1, I tested the following null and alternative hypotheses:

$H_0$1: Military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors do not predict a correlation to reintegration level for combat veterans.

H_A1: Military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and/or civic engagement attitudes and behaviors do predict a correlation to reintegration level for combat veterans.

Additionally, there were four research questions that were derived from the central question that addressed the correlations between a specific independent variable and the dependent variable:

RQ1a: Does military job satisfaction predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

To address RQ1a, I tested the following null and alternative hypotheses:

$H_0$2: Military job satisfaction does not predict a correlation to reintegration level for combat veterans.

H_A2: Military job satisfaction does predict a correlation to reintegration level for combat veterans.

RQ1b: Does exposure to post-deployment stressors predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation,

education level, rank, race, time in service, the reason for ending military service, and sex?

To address RQ-1b, I tested the following null and alternative hypotheses:

$H_0$3: Exposure to post-deployment stressors does not predict a correlation to reintegration level for combat veterans.

H_A3: Exposure to post-deployment stressors does predict a correlation to reintegration level for combat veterans.

RQ1c: Does post-deployment support level predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

To address RQ1c, I tested the following null and alternative hypotheses:

$H_0$4: Post-deployment support level does not predict a correlation to reintegration level for combat veterans.

H_A4: Post-deployment support level and/or civic engagement attitudes and behaviors does predict a correlation to reintegration level for combat veterans.

RQ1d: Do civic engagement attitudes and behaviors predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation,

education level, rank, race, time in service, the reason for ending military service, and sex?

To address RQ1d, I tested the following null and alternative hypotheses:

$H_0$5: Civic engagement attitudes and behaviors do not predict a correlation to reintegration level for combat veterans.

H_A5: Civic engagement attitudes and behaviors do predict a correlation to reintegration level for combat veterans.

Table 1 shows how the plan to measure the independent, dependent, and control variables for the study. A more in-depth description of the survey methodology, variable measurement, and the data analysis plan is presented in Chapter 3.

Table 1

Measurement of Variables

	Types of variables	Measurement level	Measurement scoring
Independent variables:	Military job satisfaction	Continuous	Composite from 5 questions
	Post-deployment stressors	Continuous	Composite from 14 questions
	Post-deployment support	Continuous	Composite from 10 questions
	Civic engagement activities	Continuous	Composite from 24 questions
Dependent variable:	Community reintegration	Continuous	Composite from 7 questions
Control variables:	Age	Continuous	Individual input
	Time since leaving service	Continuous	Composite from 2 questions
	Time in service	Continuous	Ordinal
	Brach of military service	Nominal	Nominal selection
	Place of residence	Nominal	Nominal selection
	Political party affiliation	Nominal	Nominal selection
	Education level	Continuous	Ordinal
	Rank	Continuous	Ordinal
	Ending military service	Nominal	Nominal selection
	Sex	Nominal	Nominal selection
	Race	Nominal	Nominal selection

Note. The selection of responses to the control variables was obtained from official U.S. Department of Defense statistics.

This study was intended to answer the research question to extend the scholarship of veteran policy research into the reintegration process. The research question was answered by examining the impact of military job satisfaction, post-deployment stressors, and civic engagement on community reintegration efforts. This analysis was needed to determine whether civic engagement has an impact on positive reintegration of combat veterans. My hypothesis for this research question was that reintegration efforts of combat veterans is affected by their perceptions of the usefulness or necessity for civic engagement activities, perceptions of the military, and the number of stressful events that occur while they are engaged in the reintegration process.

Theoretical Framework

I used the theoretical framework of social ecology theory to explore the relationship between civic engagement and the reintegration efforts of combat veterans. The theory originated from Binder (1972) who discussed institutional diversity and the interdependence of communities that can either protect or harm vital resources. This nested framework provides a lens to examine resource management within complex social-ecological systems based on the interactions of actors, the government system, and the resources themselves.

The goal of social ecology theory is to provide common concepts of strategies, rules, and norms to organize the social efforts to preserve resources (Ostrom, 2009). These concepts serve as tools to diagnose the sustainability of complex social-ecological systems. The initial focus of this framework revolved around the physical environment's resources. However, the application of this framework has broadened to include social problems of the community after it was combined with the institutional analysis and development framework (McGinnis & Ostrom, 2014). Additionally, the theory was used to examine the increasing diversity within social-ecological systems and expanded the concept of actors to differentiate between collective and individual action taken within the social-ecological equation (McGinnis & Ostrom, 2014).

I also applied the problem-solving theory to improve the applicability of this framework to the target audience of combat veterans. The underlying premise of problem-solving theory is that an individual engages in a methodical approach to a

problematic situation, which allows the individual to perceive the aftermath of actions taken and determine the overall effectiveness of the solution (Dostál, 2015). This requires that the individual perceives the problem and is willing to deal with it.

Currently, problem-solving theory is being used by the VA as a psychological treatment that falls under the umbrella of cognitive-behavioral therapy (Tenhula et al., 2014). This process closely mimics the military decision-making process and can help activate the previous knowledge and experience of the individual methodically. Applying the problem-solving theory to the social-ecological system may allow the individual to focus on the collective while improving the active presence within the community.

Nature of the Study

This cross-sectional quantitative study included a correlational design. A quantitative focus was consistent with the examination of the potential relationships between civic engagement, military job satisfaction, and post-deployment stressors and combat veterans' reintegration efforts. The independent variable of civic engagement was defined as individual or collections actions to identify or address the issue of public concern. Following the findings of Feaver and Gelpi (2011), I controlled for age and political party affiliation, which are two variables found to impact perceptions of legitimacy for actions taken in the public sphere. Additionally, due to concerns about how and why an individual's military service ends, this variable was also included as a control variable (see Godier, Caddick, Kiernan, & Fossey, 2017; Libin et al., 2017). I adapted the scales included in the four instruments to meet the requirements of a

quantitative online study. The Likert scaling of the predictor variables allowed me to examine the attitudes and behaviors of participants as a continuous variable (see Field, 2013). The measurement of variables was conducive to hierarchical multiple logistical regression to examine the interactions between the independent variables (continuous and nominal) and the continuous dependent variable. Assumptions of multiple logistical regression, such as the normality of variables, were tested before conducting the statistical test, and post hoc testing was done to determine the degree of interaction between the variables in the study.

Definitions

Several terms were used throughout this study that can be viewed through various lenses, and it was essential to provide a definition for clarity. The following terms are defined to assist the reader and present a more concise view of ideas and arguments.

Civic engagement: According to Adler and Goggin (2005), civic engagement refers to the ways that citizens participate in a community to improve preexisting conditions or shape its future, and is also referred to as social capital. This process includes various stages of interactions including the identification of an area of concern, creating a focus of effort, and addressing the concern or problem. Civic engagement can exist as either an individual or collective effort and is focused on improving the element of human connection within the community (Diller, 2001). Civic engagement is measured through the individual's current perceptions regarding political participation, social participation, and volunteering and reciprocity (Obeid et al., 2014).

Combat veteran: According to the VA, the designation as a combat (or wartime) veteran comes from Title 38 of the United States Code (USC), Section 1710(e)(1)(D), which states that a combat veteran is a veteran who served on active duty in a designated theater of combat operations during a period of war. This definition governs the eligibility of medical care from the VA, though there is a stipulation that the individual must have received a discharge other than dishonorable. Additionally, this definition does not require that the individual experienced direct combat like small arms or indirect fire, or earned any particular award or medal based on personal involvement.

Job satisfaction: This is how individuals view their job through the lens of an emotional state by gaining pleasure or approving of the actions taken in the course of the profession (Körner, Wirtz, Bengel, & Göritz, 2015). Job satisfaction is associated with job performance, physical and mental health, and life satisfaction. Measuring job satisfaction can be conducted in two ways: global or facet. Global measurement is used to find an overview of job satisfaction with a few general questions, while facet measurement is used to prioritize elements of an individual's job to determine satisfaction. The global measurement was used for the current study because of the focus on the individual's satisfaction with previous employment within the U.S. military using the Military Job Satisfaction Scale to obtain a composite score for the study.

Reintegration: This is a process of transition, readjustment, and integration back into family and community through the domains of life (Elnitsky et al., 2017). Reintegration first requires the removal of the physical presence of the individual from

the family and community. Reintegration begins once a person physically returns. Within the active military community, reintegration is referred to as redeployment when an individual returns from a deployment and the reintegration efforts focus on the short-term effects (Freytes, LeLaurin, Zickmund, Resend, & Uphold, 2017). These transition periods include the physical movement into a community, returning from a deployment, and the end of military service. However, for the current study, reintegration referred to the long-term transition efforts of the combat veteran. I focused on the individual's current attitudes and behaviors by measuring the extent of the individual's participation, the individual's perceived limitations, and the individual's overall satisfaction level (see Twamley et al., 2013). This measurement was obtained using two domains of trust and support from the Social Capital Questionnaire to obtain a composite score for the study (see Obeid et al., 2014).

Social ecology: Social ecology refers to the study of the relationship between people and their environment by viewing the interdependence of actors, institutions, and resources as a complex system (Ostrom, 2009). Actors can be either individuals or collective groups that interact with resources and institutions. Institutions may be either government or nongovernment organizations. Within the purview of social ecology, resources are viewed as an asset that provides positive benefits to the community and is not limited to natural resources. Community reintegration was measured using all five domains of the Social Capital Questionnaire, which addresses the attitudes and

perceptions of an individual regarding access and availability of community resources (see Obeid et al., 2014).

Stressors: Stressors include events or actions that may distress an individual, though the level of stress varies according to many factors including the resiliency of the individual and support systems (Vogt et al., 2013). Combat veterans may have been exposed to stressors that were related to the high operations tempo of the military, events or injuries that occurred while in service, and interpersonal events that occur. For the purposes of the current study, interpersonal stressors were measured after the last combat deployment that the individual completed (see Vogt et al., 2013). The post-deployment stressors were measured using the Post-Deployment Stressors Scale, and were used to determine a composite score for the study.

Assumptions

The assumptions of this study originated from the self-reported nature of the survey. All information reported by participants was not verified by outside sources. I assumed that participants followed the instructions for completing the survey, made a sincere effort to complete the tasks denoted within the survey, made rational choices while completing the tasks, and had the basic familiarity with the tasks within the survey (see Ellis & Levy, 2009). The survey responses may have been subject to biases, errors in recollection, low motivation to meet the needs of the survey, and inaccuracy. The self-reported nature of the survey was necessary due to time and financial constraints in obtaining data to obtain a large sample size. The survey did not violate the privacy of the

participants, and it provided an avenue to test the effectiveness of applying the social ecology theory to reintegration efforts.

Scope and Delimitations

I sought to understand the impact of civic engagement on positive reintegration efforts by measuring attitudes, behaviors, and perceptions of combat veterans. The target population of combat veterans was selected because of the exposure to multiple reintegration efforts due to moving, redeployment, and the final transition back into the civilian community. The focus was combat veterans from recent major conflicts including Operation Iraqi Freedom (OIF), Operation Enduring Freedom (OEF), Operation New Dawn (OND), and Operation Inherent Resolve (OIR).

I excluded combat veterans from earlier conflicts. This scope was selected to identify a potential relationship between civic engagement and reintegration and to reduce the maturation threat to validity. The greater time and distance from the reintegration efforts may have skewed the results and added confounding variables that I would not have been able to remove or mitigate.

Two theories were excluded due to the inherent assumptions of their frameworks: social interaction and game theory. Social interaction theory developed by Vygotsky (1978) describes the social aspects of learning and development, and focuses on the education of children through findings that can be generalized to adults as well. However, the reason that this theory was excluded was due to assumptions of irrationality that exist within the theory (see Vygotsky, 1978). I assumed that the participants in the current

study would make rational decisions during the survey. Game theory assumes that the participants act rationally. However, there is an assumption of maximization for the participants (Shubik, 1970). I sought to examine the effects of civic engagement on reintegration as a secondary consequence rather than as the goal itself.

Limitations

A limitation of this study was self-selected participation instead of a random sample of the population. The sample may not be representative of the general population of veterans, which may threaten the study's external validity due to selection bias. However, the results of the study are generalizable to the sample contained within it. Additionally, the use of social media sites as the medium to obtain participants may garner a younger audience, and limit the generalizability of the findings (Chang, Yu, & Lu, 2015).

Furthermore, there was a potential for bias because I am a combat veteran who transitioned out of service after 2012. This may have led to a subconscious tendency toward confirmation bias (see Fforde, 2015). Confirmation bias was limited by standardizing the questions of the survey, maintaining a research journal, and carefully examining the raw data and findings.

Significance

Veteran reintegration issues exist for U.S. policymakers, the private sector, the public, and veterans themselves (Twamley et al., 2013). Although not every veteran suffers from same issues, there are numerous reports of difficulties in reintegration and

assimilation due to the perceptions of disparateness between the two communities (Smith & True, 2014). These beliefs derive from misunderstandings between the communities as well as the veterans' view of the tasks embedded in the act of returning, including the feelings of being a burden and not belonging (Elnitsky et al., 2013).

Recent research indicated that mindfulness and finding meaning in life are important factors for the resilience of the veteran (DeViva et al., 2016). Veterans may feel more empowered if the current national trend of doing something for veterans is replaced it with a more meaningful way to apply experience and exposure of the veteran for the benefit of the country (Hodges, 2016). Social ecology theory is used to examines the interactions of actors, institutions, and resources as they relate to the health of the complex social-ecological system (Ostrom, 2009). Findings from the current study may promote positive social change through examination of these interactions in the context of the identification of an individual as an asset/resource for a community. The civil-military gap is an obstacle to positive community relations, which perpetuates dangerous stereotypes and misunderstandings that have a negative impact on the health of the community.

Reintegration efforts are a necessary element of military service, and refining this process may enable a smoother transition for both the military and civilian communities by mitigating the disparities and accentuating the similarities. Civic engagement is an important part of belonging to a community and creates a presence that many researchers argue the military is missing in the current environment (Fordham, 2016; Garcia, 2014;

Hajjar, 2013). Findings from this study may promote positive social change by emphasizing the sense of belonging to both communities.

The civil-military gap has a negative impact on the United States. This study may promote positive social change by encouraging positive interactions between all actors, regardless of culture or subculture, within this complex social-ecological system. Based on the results of the study, the promotion of civic engagement may provide individual and collective benefits. Combat veterans have experience with difficult situations that may be applied to domestic social issues.

Summary

In this chapter of the study, I described the social problem of veterans' reintegration efforts into the community, the purpose of this study to identify a possible factor to improve the transition, the guiding research question, and implications for positive social change. In this study, I examined the impact of civic engagement on the reintegration process for combat veterans. Specifically, I examined the attitudes and behaviors of combat veterans regarding civic engagement, and how civic engagement may impact their reintegration into the civilian community.

In the next chapter, I conduct a thorough examination of the themes within the literature of veteran reintegration and civil-military relations. The goal was to provide a comprehensive review of the current literature regarding veteran reintegration and civil-military relations to understand the complexity of the issues. This review enabled me to conduct a study that provided a meaningful contribution to the field of veteran policy

research. There are four central themes addressed in the literature review: military culture and experience, the civil-military divide, factors and issues relating to reintegration, and factors and issues relating to civic engagement.

Chapter 2: Literature Review

Reintegration of combat veterans remains a critical element of U.S. public policy; however, little is known about how civic engagement may impact the reintegration process. The purpose of this study was to determine the degree that attitudes and behaviors of the combat veteran affect the positive reintegration into communities. A thorough, manual, electronic review of information revealed that successful reintegration occurs for most veterans transitioning back into the civilian community (Elnitsky et al, 2017). However, approximately 1 in 5 veterans have difficulties due to the attitudes and behaviors endemic to both the military and civilian cultures in the United States, which include a loss of identity, stereotypes, and misunderstandings between the two distinct cultures (Besterman-Dahan, Lind, & Crocker, 2013). This literature review addresses the underlying factors for successful and unsuccessful reintegration efforts of service members through use of the following headings: military culture and experiences, the civil-military divide, factors and issues relating to reintegration, and factors and issues relating to civic engagement. I also examine the literature on the theoretical foundation and the methodological approach.

Literature Search Strategy

This literature review focused on peer-reviewed articles and studies that addressed veteran reintegration and civic engagement attitudes and behaviors of veterans published within the past 5 years. This review was performed to identify the research problem, provide a framework to conduct the study, and examine the context for the study. A

search for literature included utilizing online academic databases, such as ProQuest, EBSCO host, the Military and Government Collection, SAGE Full-Text Collection, CINAHL and MEDLINE, Thoreau Multi-Database, and Taylor and Francis Online. I also searched the Department of Veterans Affairs official website.

The research was limited to articles published within past 5 years to ensure that the application of the findings was relevant. After the attacks on September 11, 2001, many Western countries joined the U,S. coalition to combat terrorism in the OEF and OIF theaters of operations. Due to the similarities in culture and experience, I reviewed studies that addressed reintegration efforts of the militaries of Western countries including Canada, the United Kingdom, and the Netherlands. The following key words were used: *veteran*, *reintegration*, *civic engagement*, *community involvement*, *volunteer*, *perceptions/beliefs/assumptions*, *military subculture*, *military caste*, *transition*, *deployment*, *civil-military gap/divide*, *self-selection*, and *problem-solving therapy.* The combinations of search terms were *veteran reintegration*, *veteran civic engagement*, and *veteran volunteer*.

Theoretical Foundation

I used the theoretical framework of social ecology theory to explore the relationship between civic engagement and the reintegration efforts of combat veterans. Social ecology theory allowed me to view combat veterans as a community resource and provided a lens to combine micro- and macro-level perspectives within the analysis. The theory originated from Binder (1972), who described an interdependent relationship

between people and the social and biological environment. Binder's premise was that individuals could not be understood isolated from their environment. This premise provides context for actions and reactions of individuals, organizations, and communities, which enables a complete picture through a plurality of perspective.

Social ecology theory has four underlying assumptions embedded within its perspective. Stokols (1992) identified these assumptions in research on health promotion practices. Stokols' first assumption is that within the social-ecological approach there are multiple facets of the physical and social environment. The second assumption involves the scale and complexity of environments, including the physical and social components, scale and proximity to individuals and groups, and the objective and subjective qualities. The third assumption is that research conducted within this theory incorporates several levels of analysis and varied methodologies. The final assumption is the interdependencies of environments (immediate and protracted) and the dynamic interactions between people and their environments, which is a conceptual element of systems theory.

Stokols (1996) clarified this theoretical framework with five principles from the core of this theory in research on improving community health practices. The four assumptions remain within these principles, but Stokols broadened the scope of research and analysis that occurs within the parameters of this theory. Stokols' refinements included multiple dimensional analysis, differential dynamic interplay, the relevance of systems theory, the interdependence of environmental conditions, and the inherent

interdisciplinarity of research. The interdisciplinarity approach allows researchers to combine micro- and macro-level perspectives of an issue. Inclusive analysis of this nature provides an avenue to promote well-rounded understanding of the actors and the development of comprehensive programs based on these relationships.

This theory has been applied outside of public health policies. Ostrom (2007) refined the theory to focus on institutional diversity and the interdependence of communities that can either protect or harm vital resources. Ostrom added elements of collective choice, natural resource management, and common-pool resources as a method to explore the social-ecological systems framework. This nested framework provides an avenue to discuss resource management within complex social-ecological systems based on the interactions of actors, the government system, and the resources themselves.

The goal was to provide universal concepts of strategies, rules, and norms to organize social efforts to preserve resources (Ostrom, 2009). These concepts serve as tools to diagnose the sustainability of complex social-ecological systems. The initial focus of this framework revolved around the physical environment's resources. However, the application of this framework has broadened to include social problems of the community after the framework was combined with the institutional analysis and development framework (McGinnis & Ostrom, 2014). Additionally, the theory was used to address the increasing diversity within social-ecological systems and expanded the concept of actors to differentiate between collective and individual action taken within the social-ecological equation (McGinnis & Ostrom, 2014).

Military Culture and Experience

Culture and experience impact an individual's perception of experiences, which can promote or hinder successful reintegration (Ross, Ravindranath, Clay, & Lypson, 2015). Involvement in the U.S. military provides unique socialization that affects attitudes and behaviors of all members of its community (Abraham, Cheney, & Curran, 2015; Borah & Fina, 2017; Kern, 2017). These unique experiences derive from the occupations and training that service members obtain, the daunting transition points throughout their career, the adoption of distinct language and set mannerisms, and the perceived paradoxical relationship between policy and application (Fisher, 2014; Hajjar, 2013; S. M. Miller, Pedersen, & Marshall, 2017; Nteta & Tarsi, 2015). The distinctive nature of the military lifestyle creates a military culture that appears to differ significantly from its civilian counterpart (Hoglund & Schwartz, 2014; Osborne, 2013). Military members eventually transition back into the civilian community, and identifying and promoting factors that positively influence this reintegration may help reduce the civil-military divide created by the divergence of experience and outlook (Institute of Medicine, 2013; Werber et al., 2013).

Since 1973, joining the U.S. Armed Forces has been voluntary, and self-selection into the hierarchical organization has emphasized the collective whole of the organization over the individual (Griffith, 1985; Migliore & Pound, 2016). Membership in the military services requires adherence to core principles, beliefs, and assumptions that must be taught (Migliore & Pound, 2016). This training, or indoctrination, creates a sense of

identity where the individual accepts the mantle of social responsibility to the collective to enter into the "military family" that emphasizes similarities over differences (Libin et al., 2017). One common criticism of the military family is that it is a patriarchal society that perpetuates violence against individuals who do not conform based on gender, sexuality, or self-identity (Zaleski, 2015). However, Brownson (2016) argued that the military is currently undergoing a process to equalize its personnel management and that focusing on the patriarchy or conformity does a disservice to current service members as well as the process itself.

The defense of the greater good and a sense of belonging serves as critical themes found within research into the unique culture of the U.S. military (Kern, 2017; Wands, 2013). The culture requires dedication, loyalty, self-sufficiency, and commitment at all times from service members and their families (Meyer, Writer, & Brim, 2016). This culture is translated into a language and mannerisms that are embedded throughout the echelons of the military hierarchy (Holt et al., 2017; Meyer, 2013) Individuals within the military family surrender personal rights and control in return for belonging into this all-encompassing community (Meyer et al., 2016). Moreover, the military culture and lifestyle are not isolated to military members, but the family unit as a whole (Wadsworth et al., 2013).

Living arrangements, places of employment, health as well as vacations are decisions that no longer reside with the individual, but the organization. Service members and their families must be prepared for constant moving, separation from friends and

family, deployments (combat and otherwise), and other stressors involved in a wartime military (Creech, Hadley, & Borsari, 2014). Additionally, physical and mental health is central to the military culture; being "fully mission capable" is essential to belonging, and those who do not meet this requirement must transition out of service (Crum-Cianflone et al., 2014).

Military families must contend with the realities of war that include deployments, high-risk environments as well as the potential for trauma and injury. Focusing upon service member health, LeardMann et al., (2013) examined the effect of combat deployments upon an individual's physical and mental health using findings from the longitudinal Millennium Cohort Study (MCS) that began in 2001. The MCS is a projected 21-year study that includes 140,000 U.S. military participants throughout the process (Chesborough et al., 2002). The findings indicated that combat deployments are associated with an immediate decline in the physical and mental functioning of participants (LeardMann et al., 2013).

Additionally, this decline in health affects the rest of the family unit. The separation and distance impact the quality of communication between family members as well as power dynamics as all members adapt to deployments of the service members (Carter & Renshaw, 2016; Escolas, Pitts, Safer, & Bartone, 2013; Wilson et al., 2018). Family members assume more responsibility due to expediency needs, and a desire to protect the service member by avoiding issues that may add extra stressors to an already high-stress work environment (Carter & Renshaw, 2016). Once the service member

returns then power dynamics fluctuate again, which may destabilize the family unit, especially if the service member was injured or was exposed to a traumatic event (Dekel, Levinstein, Siegel, Fridkin, & Svetlitzky, 2016; Kritikos et al., 2018). Dekel et al., (2016) conducted a study of Israeli service members and their partners and observed that the stress level of the service member affects their family members, which may lead to secondary traumatization of partners. These observations are similar to Banneyer, Koenig, Wang, & Stark (2017) who examined how parental PTSD impacts children in military families.

Total commitment is required for service members, and an element of this commitment appears to include the adoption of stoicism and silence when dealing with issues of both a personal or professional manner (Demers, 2013; Zaleski, 2015). Military members may be concerned about voicing complaints or problems because of the impact on readiness (Friedl et al., & 2015). Additionally, service members may be satisfied with their profession, even though there are perceived drawbacks to service. Research indicates that job satisfaction does impact an individual's life satisfaction as well as their mental health (Haar, Russo, Suñe, & Ollier-Malaterre, 2014; Johnson, Rode, Arthaud-Day, & Near, 2004). However, the high operations tempo and the other factors of military service may also negatively impact an individual's job satisfaction within the military.

A decline in the conditioning or conformity of service members is of concern to the U.S. military because it affects the United States' ability to project power throughout the globe (Friedl et al., & 2015; Hamilton, Coleman, & Davis, 2016). However, policy

and application conflict, which affects the attitudes and behaviors of the military community. This issue was highlighted in the movement to repeal "Don't Ask, Don't Tell," which was the U.S. military policy on homosexuality within its ranks until December 2010 (Parco & Levy, 2013). Parco & Levy (2013) found that members of the military community began acceptance of gays long before policy required it.

Mental health is another paradoxical concern of military policy. The high stress of constant wartime military since 2001 has led to the policy debate about how to approach mental health for military members (Bobrow, Cook, Knowles, & Vieten, 2013). PTSD has been declared a signature wound of OIF, OEF, OND, OIR (otherwise known as the Gulf War II-era), which has generated significant pressure upon policymakers and researchers to address this concern (Nash & Litz, 2013; Sayer et al., 2014a). However, politicians are concerned that PTSD is over-diagnosed, and that many of the veterans (Fisher, 2014). There are concerns that over-diagnosis is a precursor or enabler of malingering because of the compensation awarded to applicable service members (McNally, & Frueh, 2013).

On the other hand, only one in five service members who return from a combat deployment seeks mental health help, which indicates that the stigma of mental issues may be viewed differently than gay policy because of these concerns for malingering (Besterman-Dahan et al., 2013). The current military system removed the mental health component of security clearances and started an anti-stigma campaign (Danish & Antonides, 2013). Nevertheless, the stigma appears to still influence the help-seeking

attitudes and behaviors within the military community because it is perceived to counter the narrative of strength in resilience (Fisher, 2014; Sayer et al., 2014a).

The Civil-Military Divide

The two distinct cultures of the civilian and military community complicate the reintegration process. Experiences within the military do not create complete uniformity or conformity of its service members; however profound changes occur in worldview and outlook of its personnel (Ruffa, Dandeker, & Vennesson, 2013). The dissimilarities of the military and civilian communities created a pronounced rift, which complicates civil-military relations within the United States (Auerswald, 2016; Baker, Basham, Bulmer, Gray, & Hyde 2016). The U.S. Constitution dictates that the military hierarchy must be subordinate as well as answerable to the civilian sector. This chain of command serves as a preventative measure to keep the military from overthrowing the government (Bruneau, 2016). Civilians control the military through three principal methods: cash, careers, and culture (Bruneau, 2016). The military is dependent upon their civilian counterparts understanding the purpose, integrity, and validity of the military. However, it appears that the removal of the draft hinders this degree of comprehension as the culture and connections between the civilian and military sectors dissolve (Hauser, 2017).

Those who join the military are a small segment of the U.S. population. According to the U.S. Census Bureau (2017) and the VA (2017), the United States has a projected population of over 248 million, and approximately 20 million have ever joined the military, which is 7.4%. Overall, 16.5 million of these veterans have served in a

wartime military, and 3.3 million of those veterans have served during the Gulf War II, which is 1.3% (VA, 2017). Additionally, approximately 1 million people serve currently on Active Duty, which is <1% of the total population (U.S. Census Bureau, 2017).

A debate exists over the degree of indoctrination that is required for entry into the U.S. military. Migliore and Pound (2016) describe the heterogeneity of the population that join one of the five branches of military service and depict indoctrination as a method to develop the bonds of "brotherhood" into a diverse segment of the population. However, Nteta and Tarsi (2015) applied statistics from the U.S. military's recruitment efforts to show a growing homogeneity of those who enlist in the U.S. military. This study's statistics showed that the current majority of enlistments originate from the Southern United States, conservative (Republican) and are Caucasian men (Nteta & Tarsi, 2015). This finding correlates to a study by Johnson, Dawes, McGue, & Iacono (2017) who found that previous military participation of a family member increases the potential for military service of an individual as well as the success of that individual's military career if they self-select into the military. However, Nteta & Tarsu (2015) argued that the military population showed a propensity towards racism due to these statistics, which Fischer, Lundquist, & Vachon (2016) contradict based upon the heterogeneity of neighborhoods that veterans voluntarily live.

The perception of the growing homogeneity does generate concern of a growing "military caste" within the United States, which runs counter to the foundational democratic ideals of the nation (Fordham, 2016). The voluntary nature of U.S. military

service functioned as the catalyst for this concern and generated debate over the necessity of bringing back conscription to government service (Fordham, 2016; Hauser, 2017; Liebert & Golby, 2017). Liebert and Golby (2017) support the voluntary nature of the U.S. military because of political costs that conscription would accrue, though acknowledge that there is a skew in representation. Hauser (2017) challenge the assertion of Liebert and Golby (2017) that the costs of the political reality outweigh the benefits of bridging the civil-military divide. Hauser (2017) recommends that promoting mandatory national service to create a universal identity within the nation and ameliorate many of the tensions between subgroups within the country.

One of the most significant concerns entrenched into the civil-military divide is the lack of understanding of civilians, that may lead to issues with trust and confidence (Klein, Klein, Lande, Borders, & Whiteacre, 2015). Perceived military failures have eroded trust in the military hierarchy in both the United States and the United Kingdom (Auerswald, 2016). However, the trust of military personnel continues as public opinion differentiates military situations from the individuals who enact the policy (Hines, Gribble, Wessely, Dandeker, & Fear, 2014). This trust is a marked change from previous times of conflict, in particular, the Vietnam War (Johnson et al., 2017). Presently, Americans emphasize the sacrifice and selflessness of these individuals, even in some of the counter-recruitment efforts that seek to neutralize this narrative (Cohn, 2015; Friesen, 2014).

However, that focuses on the concept of being a member of the military but does not necessarily involve civilian knowledge of the military lifestyle (Hines et al., 2014). The lack of contact between the two communities may also be derived from the attitudes and behaviors of the military. Part of the military indoctrination is to define groups as either "friendly" or "hostile" (Blackburn, 2016). Even independent researchers are subjected to these designators, which may influence access and information (Baker et al., 2016). This mistrust reverberates back into the civil-military divide, which makes reintegration and other transitions difficult for both the military and civilian communities.

Factors and Issues Relating to Reintegration

The military profession is a temporary identity for service members in the United States, and eventually, these individuals must transition back into the civilian community and assume their civilian identities. Elnitsky, Blevings, Fisher, and Magruder (2017) conducted a literature review for the past fifteen years on reintegration of veterans and found that the primary focus was with the individual and the creation of pilot intervention studies but little about the effectiveness of the interventions. The Institute of Medicine (2014) released a report that the Department of Defense underutilized environmental strategies for reintegration while focusing on ineffective campaigns or propaganda that have no evidence of effectiveness. This report does indicate that there may be a systemic issue in comprehending reintegration as well as ambiguity in the perception of what success looks like in the veteran population.

These shortfalls may be due to the distinctive nature of an individual's difficulties, the focus on short-term reintegration, as well as the lack of understanding of military culture by providers (Gil-Rivas, Kilmer, Larson, & Armstrong, 2017; Libin et al., 2017). Miller, Finn, & Newman (2014) surveyed community healthcare providers and found that more than half of the participants claimed incompetence in all but the primary PTSD treatment in this self-identifying study. However, this survey had a meager response rate of 4.8%, and of those who participated, 75% had a family member in the military (Miller, K.E. et al., 2014). These issues may indicate a bias in the reporting as well as a limitation in the generalizability of the results.

An individual's specific time for military service is finite due to the nature of the physical and psychological requirements for this career. Everyone must transition out of military service at some point and begin the process of reacclimatizing to the civilian community (Ahern et al., 2015; Sherman, Larsen, & Borden, 2015). This reintegration is similar to returning from a deployment, which operates as an individualistic process and not a scripted timeline (Freytes, LeLaurin, Zickmund, Resende, & Uphold, 2017). Over half of these returning service members readjust without interventions; however, many require some form of intervention to regain their civilian identity (Balderrama-Durbin et al., 2015; Sayer, Carlson, & Frazier, 2014). Successful reintegration appears to be a derivative of functioning and support gained from five key domains: psychological, physical, family life, employment, and social network (Cornish, Thys, Vogel, & Wade, 2014; Doherty & Scannel-Desch, 2015; Godier, Caddick, Kiernan, & Fossey, 2017).

The first domain, psychological support, revolves around the sense of self and self-worth and has three components: identity, motivation, and mental health (Rosen et al., 2014; Smith & True, 2014). This domain is a challenge of metacognition, self-reflection, honesty, and trust (Doherty & Scannel-Desch, 2015; Fischer et al., 2015; Kirchner, Ladd, Elsaw, & Schlub, 2013). Honesty and trust may be the most difficult elements of this domain because of the indoctrination, culture, and worldview perpetuated within the U.S. Armed Forces (Ali & Wolfert, 2016; Meyer et al., 2016; Ross et al., 2015). Additionally, psychological support is one level of support that occurs at the individual level. All the other supports have external components that may remove the locus for control from the veteran.

Members of the U.S. military do not surrender their citizenship or identification as a civilian in the United States when they join the military. Instead, they adopt an additional identity that is both united and yet distinct from their original understanding, and while serving in the military this idea of identity may further transform (Demers, 2013; Libin et al., 2017). These individuals must contend with their opposing identities, and it can be a challenging experience as they transition from military service to civilian life (Smith & True, 2014). In war zones, individuals are exposed to high levels of stress due to the constant threats of danger, strict schedules that limit downtime, moral and ethical challenges, and separation from family support systems (Currier, Holland, Drescher, & Foy, 2015).

As the veteran transitions into civilian life, they may feel frustrated, depressed, and lonely because their existence appears to be mundane, the "life and death" consequences of their actions removed, and they do not belong to something greater than themselves (Danish & Antoniders, 2013; Doherty & Scannel-Desch, 2015). Veterans may find that resuming the identity of a civilian problematic as they do not identify with the community, lack necessary core competencies like cultural awareness, and do not have the interpersonal traits needed for successful reintegration (Cox & Albright, 2014; Sayer et al., 2014).

Control is the foundation for the psychological domain with the underlying principle of power (Danish & Antonides, 2013; Kern, 2017). Individuals self-select to join the military, they voluntarily surrender certain freedoms, and in return, they are empowered to serve the country. When the individual loses this sense of empowerment then there may be psychological difficulties when reintegrating into civilian society, primarily the self-identity construct (Alfred, Hammer, & Good, 2014; Sayer et al., 2014; Worthen & Ahern, 2014). Early or involuntary transition from military service may be a significant detriment to reintegration because they individual lost control and choice, whether it is due to an injury, personal or professional issues, or a force reduction (Godier et al., 2017; Libin et al., 2017). Libin et al., (2017) found that an involuntary separation due to injury was perceived to be just as traumatic as the injury itself. Additionally, losing control affects an individual's self-motivation and may create concerns with trust,

substance abuse, risky behaviors, and isolationism (Fischer et al., 2015; Hawkins, McGuire, Linder, & Britt, 2015).

PTSD may be a signature wound of the Gulf War II era, but it is only one of the mental health issues that veterans may encounter. Trauma to friendly forces is an unintended consequence of war, whether it is caused by a physical, psychological, or moral injury (Currier et al., 2015; Glynn, 2013). The stigma and perceived negative impact upon employment may impact an individual's decision to seek mental health care, which may lead to further complications like involvement in the justice system (Vogt et al., 2014). Hartwell et al., (2014) conducted interviews of justice-involved veterans and found that 93% of participants self-reported traumatic experiences that led to their incarceration, which is over 30% higher than the rate of lifetime traumas of males in the general populace.

Additionally, with the changes in the military structure, explicitly integrating women into combat units, there are significant changes in traumatic exposure. Men in the military have a similar percentage of PTSD found in their civilian counterparts, but women have a two-fold higher prevalence than their male counterparts as well as greater than the female civilian population (Crum-Cianflone & Jacobson, 2013). However, Dursa, Reinhard, Barth, & Schneiderman (2014) surveyed over 20,000 participants and found that males who deployed had a higher prevalence of PTSD than deployed females. This finding may be due to the indirect combat job roles that the majority of women fill, while a large segment of males is deployed into direct combat roles.

Individual's process traumatic events differently based on numerous factors, to include: resiliency, support systems, and the number of traumatic events experienced (Cheung, Britt, Raymong, Zinzow, & Pury, 2016). An individual's response to these traumas may be unique, but several repeating characteristics do occur. These responses include loss of control of emotions, intimate partner violence, and potentially the fear of conflict due to the potential of exposing partners, children, or others to violence or violent outbursts (Sherman et al., 2015; Sullivan & Elbogen, 2014). The veteran responds by increasing isolationistic tendencies, which exacerbates feelings of depression, failed relationships, homelessness, joblessness, and potentially suicide (Elbogen, Sullivan, Wolfe, Wagner, & Beckham, 2013; Osborne, 2013).

One evidence-based method to overcome these difficulties is the problem-solving therapy, which falls under the cognitive-behavioral therapy umbrella (Kasckow et al., 2014; Kirchner et al., 2013; Tenhula et al., 2014). The basis of this therapy is to help individuals shift their perspective of issues into challenges that can be overcome methodically. Tenhula et al., (2014) conducted a 3-year study with 621 veterans enrolled, had a 77% completion rate, and found that participants were more likely to complete the program because it was perceived to be more "training" than therapy. Findings in similar studies indicated that the veteran participants were familiar with the logic behind this therapy because it mimicked the military decision-making process, which is a fundamental element of indoctrination and training and enabled the individual to regain a

sense of control (Bell et al., 2017; Brockway et al., 2016; Kirchner et al., 2013; O'Donnell, Karlin, Landon, Dash, & Reed, 2018).

The second domain, physical functioning, does overlap with psychological support. The second signature wound of Gulf War II is traumatic brain injury (TBI), which has similar symptoms to PTSD (Cifu et al., 2013). There is an increased potential for co-morbidity of physical and psychological health concerns, which has a significant adverse impact upon an individual's reintegration efforts (Brancu et al., 2014; Lippa et al., 2015; Pugh et al., 2014). Additionally, health and fitness are vital requirements for job functioning while in the military. However, the missions, deployments, and stress eventually impact the overall health and wellness of service members (Crum-Cianflone et al., 2014; Interian, Kline, Janal, Glynn, & Losonczy, 2014; McAndrew et al., 2013; Plumb, Peachey, & Zelman, 2014). Deteriorating fitness and injuries may affect the sense of identity and self-worth, which can transfer over to the service member's family life.

The third domain, family life and support, is an integral part of the reintegration efforts. The core family unit of an individual is an inclusive concept of ties to blood relatives, partners, as well as friends and fellow service members (Cheung et al., 2016; Glynn, 2013; Werber et al., 2013). Family life includes communication and individual roles in the relationship. However, most of the research into reintegration does not cover the concept of family as a unit, but the individual (Murphy & Fairbank, 2013).

Communication is necessary for relationships, especially during periods of separation and high-stress (Carter & Renshaw, 2016). With the current technology

service members may stay connected to their families, even while deployed on a combat mission. Maintaining contact with family members help to reduce anxiety, stress, and increase morale; however, there are limitations and constraints based on the needs of the military (Carter & Renshaw, 2016).

Open communication requires trust but may add a degree of complication for the service members as well as family members based on the situation (Sherman, Larsen, Straits-Troster, Erbes, & Tassey, 2015). While service members are deployed or separated due to training families may restructure roles. This change enables the family unit to function in the new environment as well as minimize external stressors for the service member (Martindale-Adams, Nichols, Zuber, Graney, & Burns, 2016). Families may make more unilateral decisions without input from the service member, though these decisions were generally minor household issues (Martindale-Adams et al., 2016). Nevertheless, the return of the service member required further restructuring as the family reacclimatized, and negotiation of roles and responsibilities may better facilitate this process.

This period of transition may create family tension as well as increase the service member's feelings of isolation and not belonging (Beardslee et al., 2013; Interian et al., 2014). Tension and stress may lead to an increased potential for violence within the family unit. Sullivan & Elbogen (2014) surveyed 1388 participants that found that PTSD symptoms as well as the diagnosis-related significantly to violent behaviors of the service members. Lester et al., (2016) performed a study that corroborated these findings and

indicated that family adjustment, not a deployment, was a statistically significant factor for mental health concerns of reintegrating service members. Another study noted that it was the female partner of the service member that was the aggressor in intimate partner aggression following a combat deployment (LaMotte, Taft, Weatherill, Scott, & Eckhardt, 2014). However, this study had a small population sample and may have had bias due to the open recruitment of male veterans experiencing relationship distress.

The fourth domain, employment, is critical for reintegration efforts. However, this domain is subject to all of the other domains' factors, and also has a reciprocal impact upon the other domains. Motivation, self-esteem, and identity are all vital for successful job seeking, and military members do have transferable skills to enter the job market (Cooper, Caddick, Godier, Cooper, & Fossey, 2016). However, if an individual is not physically or mentally capable of working or have limitations, then the job prospects are likewise limited. Another issue is that chronic unemployment may hinder the psychological domain, and the added stress may manifest into physical symptoms (McNally & Frueh, 2013; Nezu et al., 2017). This stress may be of more concern to younger veterans or those who involuntarily transition out of military service because of limited transferability of vocational skills (Godier et al., 2017).

The VA does provide employment counseling and assist in the acquisition of new vocational skills based upon an individual's current capabilities as well as the limitations based upon the individual's medical diagnosis (Rosen et al., 2014; Twamley et al., 2013). One of the difficulties with the VA Vocational and Rehabilitation Program is that many

veterans are not aware of its existence or the scope of training offered (Kukla, Bonfils, & Salyers, 2015). Twamley et al.'s, (2013) findings indicated that the job search for disabled veterans, including those diagnosed with TBI and mental health disorders, had a significant success rate after going through the VA's Vocation and Rehabilitation program.

Additionally, the military policy debate of remuneration is centered upon this domain. The narrative of selfless and self-sacrificing military volunteers who are unemployed juxtaposes with the idea of disability payments for over-diagnosis or a lack of motivation to heal (Horton et al., 2013; Rosen et al., 2014). However, it appears that research findings do not support the idea of veterans being risk-averse to employment opportunities because of the potential negative impact upon their disability paychecks (McNally & Frueh, 2013). Rosen et al., (2014) found that those who applied for a mental health disability experienced significant psychological distress and actively sought out treatment. Other studies supported these findings using statistics from the MCS, which identified the diagnosis of mental disorders, not deployments, had a greater impact on the ability to find and maintain employment (Elbogen et al., 2013a; Horton et al., 2013). Nevertheless, some research does indicate that the level of disability (50% and greater) may impact employment (Tsai & Rosenhack, 2013).

The fifth domain of reintegration is the support of the social network. The military family itself is a social network because the military is seen to provide structure and protect its members (Ahern et al., 2015). The transition away from this family, or at least

into the civilian community, requires a change of mindset, peer support, and motivation to become involved in the home and community (Hawkins et al., 2015). Community reintegration efforts encompass a variety of programs, different levels of involvement, and resources that are available to veterans and their families to reduce an individual's tentativeness in their transition process (Bobrow et al., 2013).

Two difficulties for community reintegration or the use of the social network is that reintegration is a process that does not follow a timeline, and that many veterans are hesitant to involve a wider audience. Instead, many veterans feel that immediately after a transition period that they undergo a "honeymoon" where all members of the social network are willing to forgo areas of conflict, but this period only worsens the situation in the long-term (Mankowski, Haskell, Brandt, & Mattocks, 2015). Furthermore, many veterans do not see the validity of social networks as being helpful (Reedy & Kobayashi, 2015). This hesitancy may be a result of the military community viewing their civilian counterparts as "alien" or a lack of understanding of the capabilities that a more comprehensive social network may provide to service members, veterans, and their families (Ahern et al., 2015).

Factors and Issues Relating to Civic Engagement

One of the core elements of being a member of the military is belonging to something greater than themselves, and service to the nation is the cornerstone of this belief. Civic engagement, or social capital, is a continuance of these ideals, even after the individual transitions back into the civilian community. Social capital has evolved as an

inclusive concept that includes political participation, volunteering, community activities, consuming the news as well as other forms of social networking and communication (Lin, 2017). Individuals can invest in social capital through an assortment of technologies, online or offline, as a means of connecting with other individuals (Elin, 2013; Hargittai & Shaw, 2013). This variety may enable a veteran who feels disconnected or isolated to become involved in the social network. Another way to view civic engagement is as a social challenge. This view aligns with the problem-solving therapy, which veterans view as training to see issues from another perspective (Tenhula et al., 2014).

Historically, veterans have conducted civic engagement efforts more frequently than their civilian counterparts (Kaufmann, Floyd, & Shore, 2014; Levin-Waldman, 2013; National Conference on Citizenship, 2016). Veterans received a civic education throughout their military service starting from basic training and indoctrination and continued throughout their career (Hodges, 2016). Furthermore, the idea of brotherhood in the military that is the cornerstone of indoctrination can transfer into the civilian community by building bridges between the two communities as an inclusive concept (Patulny, Siminski, & Mendolia, 2015).

Nonetheless, there is a national trend toward "civic deserts," which are places where civic engagement within the community has diminished or become nonexistent based upon a lack of volunteers or digitizing efforts (National Conference on Citizenship, 2017). This civic desert may be due to a perceived financial obligation as individuals

with higher income levels are more likely to participate in civic engagement activities (Levin-Waldman, 2013). Additionally, an individual may feel that civic engagement requires a physical presence to be an active participant or member, but some studies indicate that online engagement can be as fulfilling or supplement offline activities (Albertson, Irving, & Best, 2015; Hargittai & Shaw, 2013).

Civic engagement benefits the community as well as the individual. Veterans may engage in nature activities like gardening, hiking, farming, or fishing as methods to reconnect with the world (Krasny, Pace, Tidball, & Helpland, 2014). These activities provide social capital by providing resources to the community as well as health benefits like healing and feelings of self-efficacy for the individual (Jenkins et al., 2013; Krasny et al., 2014; Lawrence & Matthieu, 2017; Matthieu, Lawrence, & Robertson-Blackmore, 2017). When veterans participate in civic engagement activities, it helps the civilian community see veterans for who they are, and make the necessary connections to help combat the narrative of "broken heroes" that reverberates throughout the nation (Klingler & Chatagnier, 2014; National Conference on Citizenship, 2016).

However, there is a gap in the literature regarding civic engagement as a method for community reintegration of veterans. Research does indicate that there are health and social benefits when conducting social capital activities, but the reasons for this relationship are still unknown (Jenkins et al., 2013). Additionally, throughout the transition period of community reintegration, there is a dearth of information regarding

the benefits of social capital as well as the variety of activities, which may encourage veterans to view these programs and efforts more positively (Bobrow et al., 2013).

Methodological Approach

Research requires the alignment of five construct components as a means to ensure reliability, validity, and replicability: research design, recruitment, data collection, instrumentation, and data analysis. These five elements provide critical guidance to the study as well as the rationale for the study and increases the overall value of the study (Ioannidis et al., 2014). The nesting of elements follows a logical and sequential approach as a means to reduce the potential waste of data, time and effort of the researcher as well as the audience (Ioannidis et al., 2014).

Research Design

The first construct component that serves as the foundation for the study is research design. Currently, quantitative methodological research designs serve as the predominant choice for examining the veteran reintegration phenomenon (Elnitsky et al., 2017). This may reflect the fluctuations in reintegration policies and procedures, which may be the reason Elnitsky et al., (2017) noted that most of the current research focuses upon designing pilot studies to examine relationships of variables. The first longitudinal study of veteran reintegration efforts indicates that Department of Defense implants changes based upon evidence garnered from these pilot studies, but this fluid situation may make it more difficult to build more comprehensive studies or incorporate changing needs of veterans (Vogt et al., 2018). However, it may be due to the civil-military culture

gap, which I noted in a few studies that described the need for connections and knowledge of military systems to gain access to participants for studies (Baker et al., 2016; Cohn, 2015; Meyer et al., 2016).

Qualitative studies did occur but centered mainly upon the family units as a whole or the spouse (Balderrama-Durbin et al., 2015; Cornish et al., 2014; Freytes et al., 2017). Spouses operate in both spheres as civilian and military, and could be viewed as a bridge for communication between the two communities. Additionally, the civil-military gap may skew qualitative studies if researchers do not understand the facets of military culture when conducting interviews (Meyer et al., 2016). Baker et al., (2016) conducted a panel of feminist theory researchers who discussed difficulties in understanding nuances and lack of access because of being considered an "outsider" to an apparent insular community. This lack of access may be a valid reason for the relatively low number of qualitative studies.

Recruitment

The second construct component revolves around the selection of participants through recruitment and sampling. Recruitment of combat veteran participants was either conducted in partnership with the VA and/or Department of Defense (DOD), or through an online venue. The longitudinal studies were directed by the DOD and used its resources for the recruitment of a sample that would garner a statistically significant result as well as mitigate against maturation (Chesborough et al., 2002; Crum-Cianflone et al., 2014; Vogt et al., 2018). Additionally, the majority of the medically-oriented

research studies were conducted in conjunction or with oversight from the VA due to the sensitivity of the data (Negrusa & Negrusa, 2014; Nezu et al., 2017; Plumb et al., 2014). However, this method of recruitment does limit the reach of the study to combat veterans who actively use the VA hospitals and/or those who maintain communication with the DOD. Instead, recruitment through an online venue, or social media, provides access to a larger population, and the ability to connect with low-prevalence and hard-to-reach populations (Khatri et al., 2015).

Data Collection

The third construct component for the study is how the information will be collected from participants. The majority of studies collected data through the use of an online survey (Lester et al., 2016; Miller et al., 2017; Wells et al., 2014). The use of an online study provides an extra level of anonymity for the participants that is not possible in qualitative studies. This additional layer of privacy may allow participants to mitigate the stigmas related to the military culture, which could improve the validity of the studies' findings (Clement et al., 2014). Nonetheless, there is an imbalance in the sampling with the online surveys because spouse and officers were more likely to respond to an invitation to participate than enlisted personnel and the service member themselves (Lester et al., 2016; McAndrew et al., 2013; Nezu et al., 2016). The use of social media may help mitigate this effect by recruiting a larger population base with the low-prevalence members of my target population (Khatri et al., 2015).

Instrumentation

The fourth construct component adds value by detailing the instrument(s) as well as providing the rationale for use in the study. Social ecology theory examines a community resource through its capability, its capacity, and the effect it has on the community as a whole (Ostrom, 2009). Examining veterans through this theory shows that veterans can play a dual role in the community; both as a resource and an actor based on their experiences and knowledge (McGinnis & Ostrom, 2014). An actor can influence and use community-level resources (Sakurai, Spiro, & Gonzalez, 2017). However, according to McGinnis & Ostrom (2014) a veteran may serve as a community resource by the amount of social capital the individual willingly invests into the community within the scope of social ecology. The level of participation in civic engagement activities may be impacted by how perception affects satisfaction and the individual's experiences with stressful life events (Alvinius, Johansson, & Larsson, 2017).

Social capital. Social capital has five recurrent themes for actors to participate as their capabilities allow political participation or citizenship, social participation, volunteering and reciprocity, trust, and support (Coon, 2016; Obeid et al., 2014; Patulny et al., 2015). These five categories can be emphasized singly or as a whole based upon the preference of the individual. The fundamental concept of interdependence within the community is deeply rooted in all five of the themes for the express purpose of increasing the wellbeing of both the individual and the community (Jowell et al., 2007). These themes echo the values associated with the military culture like honor, commitment,

loyalty, and selfless service, and can be exported to the broader civilian community (Migliore & Pound, 2016). Additionally, military service may be considered a type of institutional civic education center, which indoctrinates theories of creative problem-solving and participation in its members (Hodges, 2016).

The first theme of political participation or "good" citizenship is the activity of the individual within their local and national spheres of governance. This view of citizenship would include how an individual perceives politics at the local and national levels, level of satisfaction with the multi-level governance, and whether or not the individual feels affiliated or alienated by a political party (Jowell et al., 2007; Obeid et al., 2014). An implicit question is whether or not the person desires or feels like that they can have a voice, whether it is active or passive within the democratic process (Miller et al., 2011). This a is similar to the military culture's emphasis on being part of something larger than themselves and requires that the individual feels that their actions can make a difference in some small way (Hodges, 2016).

The second theme of social participation can be described as having some level of interaction with other people in a non-work context and is centered upon the wellbeing of the individual (Harrison, Quick, & Abdallah, 2016). This may be virtual (online) or in person and focuses upon building connections to other people. Physical meetings have been associated with increased physical activity and better health (Saito et al., 2018). However, virtual connections have also been found to have benefits for participants including online gaming because it is a form of social presence that builds the necessary

connections to support systems, even if the individual is operating from a remote location (Oztok, Zingaro, Makos, Brett, & Hewitt, 2015; Townsend, Wallace, Smart, & Norman, 2014). This bridging is the intent behind military activities that may sometimes be labeled as "mandatory fun," which are forced cohesion activities that seek to create connections outside a work context (Smith, 2015).

The third theme of volunteering and reciprocity focusing upon the reciprocal relationship embedded into support systems. The concept of "give and take" allows an individual to participate based upon the capabilities and resources. This concept includes the donation or "giving" of either time and/or money to the support of social systems (Obeid et al., 2014). However, the second element of this theme is how the individual perceives other individuals in their periphery, which is the "taking" part of the equation. The military is an all-volunteer force and encourages its members to be active in the community as volunteers (Hawkins et al., 2015). The civil-military gap may complicate the perception of reciprocity as military members may feel uncomfortable partaking of a social benefit or interacting with the civilian community based upon misunderstandings due to stereotypes (Mittal et al., 2013).

The fourth theme of trust centers on how the individual feels about the credibility of national and local level institutions. This theme has two components, which are derived from the first two themes of social capital: social and institutional trust (Obeid et al., 2014). An individual may be less prone to participate in either political or social activities if they do not have trust or faith in the organization (Lins, Servaes, & Tamayo,

2016). This is a critical element of the military because of the wartime mission. If an individual does not have faith in the institutions and laws, then there is a high probability that the mission may fail and/or have unnecessary casualties (Fulmer & Ostroff, 2017). Nevertheless, distrust and paranoia are some of the PTSD-like symptoms that may affect an individual, or the individual may perceive that the institutions do not truly represent the person's interests (Coleman et al., 2017).

The fifth theme of support is embedded in the third theme of volunteering and reciprocity but focuses upon the emotional well-being of the individual (Obeid et al., 2014). Emotional wellbeing includes having a strong support network that the individual can trust, confide in, and have open conversations (Lin, 2017). However, this is one of the most critical themes because it examines how the individual perceives the underlying concept of interdependence (Harrison, Quick, & Abdallah, 2016). This is one of the hardest elements to crossover into the military because of the hierarchical rank structure, though mentorship is a key part of professional development of service members (McMains et al., 2018). This training prepares individuals to become future leaders and helps continue the indoctrination of the military culture.

Indoctrination does follow the individual when they transition back into the civilian community. Huyser, Sanchez, & Vargas (2016) who found that American Indians and Alaska Natives were more likely to participate in civic engagement in the civilian community if they had some military background. Moreover, there are positive physical and mental health benefits from engaging in investment in social capital. Matthiew,

Lawrence, and Robertson-Blackmore (2017) found that PTSD-like symptoms decreased as participants indicated an increase in these social activities, specifically in thoughts of loneliness and perceived lack of support. Albertson, Irving, & Best (2015) described how peer support through community activities could help veterans involved in the criminal justice system and with substance misuse.

However, veterans may not accept their roles due to not understanding or complications stemming from military service (Cederbaum et al., 2017; Reis, 2015). Patulny, Siminski, & Mendolia (2015) suggested that some of the reason a veteran may reject social capital investment or roles in the community may stem from the perception that it would harm their self-identity. The findings from the study indicated that reaching out to make the necessary connections may impact their feelings of self-worth and independence or what the researchers stated as the "masculinity" of the veteran (Patulny et al., 2015). These findings may indicate that the individual may be influenced by internal factors that impede their civic engagement. Two factors may limit an individual's ability to invest in the community: their level of job satisfaction stemming from military service and exposure to stressors (Auer-Rizzi & Reber, 2016; Reis, 2015).

Military job satisfaction. The first factor is the level of job satisfaction an individual has of their military service after they have transitioned back into the civilian community. Perception affects an individual's attitudes and behaviors toward a given topic. When an individual perceives an area positively, then they are more likely to engage and re-engage in activities related to the area, where the inverse is true for

negative perceptions (Petty, 2016). Individuals with a high-level of military job satisfaction may recognize a sense of unity between themselves and the core beliefs and values of the military community (Alvinius et al., 2017). A high-level of job satisfaction may be an indicator that the individual will evolve into the dual role of community resource and an actor, while low-levels may signify the opposite (Alvinius et al., 2017).

If an individual feels that their time in military service was wasted or unwanted, then the individual may reject all or most of the training or indoctrination received while serving (Österberg & Rydstedt, 2018). This negative perception may originate from job burnout, which can occur during military service due to the high operations tempo, multiple deployments, moves, and long work hours (Lopes, Chambel, Castanheira, & Oliveira-Cruz, 2015). Peng et al., (2014) examined how the individual perceives themselves in relation to organizational commitment, job satisfaction, and burnout, and found that all factors correlated. Additionally, the study's findings determined that the individual's perception-of-self influences the degree of job burnout, and indicated that these effects could be mediated with job satisfaction and organizational commitment (Peng et al., 2014).

Post-deployment stressors and support. The second factor that influences the level of commitment to civic engagement is the experiences of the individual, specifically the occurrence of stressful life events that have occurred after their deployments. Combat deployments are already viewed as stressful life events of the individual and can impact how the individual perceives future occurrences of stressors (McAndrew et al., 2013).

However, the majority of combat veterans do not suffer from PTSD but may exhibit a few of the symptoms, like a low threshold for the startle reflex (Glenn et al., 2016).

PTSD-like symptoms may limit an individual's desire or ability to interact with peers or the community at large. One of the most recognizable symptoms is isolation where the individual eliminates their connections to social support networks (Horton et al., 2013). Shandera-Ochsner et al., (2013) indicated that communication skills might also be degraded due to PTSD, which further detaches the individual from support networks. These types of symptoms may interfere with the investment of social capital.

Understanding why certain people are diagnosed with PTSD and others are not is still not known. Current research has indicated that there are genetic factors that may predispose an individual to PTSD (Hendler & Admon, 2016). Another biological aspect of PTSD is the reason why numerous occurrences of stressful life events may lead to PTSD or PTSD-like symptoms. Arnsten, Raskind, Taylor & Connor (2015) studied the prefrontal cortex of the human brain and found that continued exposure to stress impairs emotional functioning, which has been found to be a limiter in the number of social interactions an individual may conduct.

Data Analysis

The final construct component for research is how the data will be examined to identify the results of the study. Within the quantitative research conducted on veteran issues, the majority of studies used the multiple linear regression model to determine possible relationships between multiple variables (Cox & Albright, 2014; Elnitsky et al.,

2017; Sullivan & Elbogen, 2014). However, this does not describe whether or not the variable could be mediating or moderating the effect of the independent variables upon the dependent variable. None of these studies used a hierarchical multiple linear regression model to determine the control variables impact upon the other variables. This model fits my study well because it provides an avenue to view the variables through multiple points of potential interaction.

Summary and Conclusions

This chapter focused on the current research regarding veterans' attitudes and behaviors that affect reintegration efforts. This review covered the theoretical foundation for the study, military culture and experiences, the civil-military divide, factors and issues relating to reintegration, factors, and issues relating to civic engagement, and methodological approach. The majority of the literature focused upon the veteran as an individual, which could be considered pragmatic because the concept of successful reintegration is still viewed as an ambiguous term. However, this focus leaves a gap when looking at how social networks can impact this transition, precisely through the promotion of social capital activities. Encouraging civic engagement could provide an avenue to improve community reintegration as well as the lives of veterans, their families, and the community. Examining the noted variables, the methodology that was employed in analyzing data collected from an online survey will be explained in Chapter 3.

Chapter 3: Research Method

The purpose of this study was to determine the degree to which attitudes and behaviors of the combat veteran affect the positive reintegration into communities. This chapter addresses the research design and rationale, methodology, data analysis plan, and threats to validity. I used a correlational research design to examine the relationship among variables using hierarchical multiple linear regression as the statistical model. The data were collected through an online, close-ended survey that was posted on a variety of websites as a means to connect to the Gulf War II combat veteran population. Data analysis was conducted with the Statistical Package for the Social Sciences (SPSS) Version 25. Data were presented in alphanumeric coding, and assumptions required for the hierarchical multiple linear regression model were tested. This chapter also addresses threats to validity (external, internal and construct) and ethical procedures.

Research Design and Rationale

I used a correlational design to examine relationships between the independent variables (military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement) and the dependent variable (community reintegration) while controlling for age, reason for leaving the military, and political party affiliation. Demographic variables were included as additional predictors of community reintegration. I specified that the veterans must have served as a member of a combat deployment since September 2001 because these individuals had undergone multiple periods of transition. Additionally, this target population had a relatively recent transition

from the military compared to other veteran populations who transitioned out of the military over 20 years ago.

The purpose of this study was to examine correlations between the variables and develop a predictive model to advance the knowledge of reintegration for public policy through the use of hierarchical multiple regression. The correlation design allows researchers to describe the relationship between variables by determining its direction and strength (Meyers, Gamst, & Guarino, 2017). Reintegration of veterans has been a political topic of interest throughout the Gulf War II era. Research have used a correlational design to examine the interaction of variables due to the ambiguity of terms and the individual differences between participants (Elnitsky et al., 2017). Most military reintegration studies have focused on the service member's return from combat deployment and the subsequent family unit integration during this period (Cederbaum et al., 2017; Elnitsky et al., 2017; Sayer et al., 2014).

Due to the large population of potential participants, an online survey instrument was used to collect the data from Gulf War II combat veterans. Correlational research can include survey data as a method of data collection to examine the relationship between the variables (Meyers et al., 2017). The use of an online survey allowed me to access a larger segment of the target population. The online survey allowed me to collect large amounts of data from the population in a timely and efficient manner and to provide a numerical representation of the data.

Methodology

Population

The target population was combat veterans who had served as a member of a designated combat deployment during the Gulf War II era, which began in September 2001. This included missions in support of OIF, OEF, OND, OIR theaters of operation that received the designation of a combat zone as well as the hazard duty pay stipend. According to the VA (2017) and U.S. Census Bureau (2017), this population included approximately 3.3 million veterans.

Sampling and Sampling Procedures

Participants selected for this study were U.S. veterans who had experienced the effects of war with at least one combat deployment since 2001. All branches of the U.S. military were included as well as National Guard and Reserve units, both sexes, all reasons for leaving military service, and all ranks of service members. The survey excluded any U.S. military personnel who had not deployed to a combat zone since 2001, Active Duty military, family members, military civilians, and other civilian personnel who served in a support capacity to the U.S. military units or local national governments.

Convenience sampling was used to obtain participants in the study. This nonprobability sampling method was appropriate due to the lack of public information on combat veterans and their reintegration efforts. The use of convenience sampling provided the advantages of connecting with a more diverse participant pool, voluntary

participation of veterans in various locations, and the ease of access to the survey instrument through a variety of media devices including smartphones and computers.

Using G*Power, I calculated a minimum sample size of 199 (see Faul, Erdfelder, Lang, & Buchner, 2007). The sample size that was used for this study was 245), which included a buffer for nonresponses and incomplete questionnaires. This calculation included a moderate effect size (0.15) as determined by Cohen (1988), a minimum power of 0.80, an alpha level of 0.05, and 16 criteria. The moderate effect size was appropriate because the scales are not commonly used in conjunction with each other. The selection of an 80% power level was appropriate due to conventional standards in research because no intervention was included in the study, and as a method to reduce the potential of a type II error (G. M. Sullivan & Feinn, 2012). Using these parameters for data collection provided the ability to reject the null hypotheses at an alpha of 0.05 while mitigating the potential for type II error (see Meyers et al., 2017).

Procedures for Recruitment, Participation, and Data Collection

Participants were recruited for the online survey through an invitation posted on multiple Internet sites that had veteran participation, including the Iraq and Afghanistan Veterans of America's (IAVA) Facebook website. A description of the study and delimiters were included in the introduction to the study, as well as prescreening selectors that included the informed consent agreement and verification of status as a combat veteran to ensure that the selection criteria of the study were met.

Demographic variables. Various demographic data were collected for the survey as a method of verifying military service and identifying critical information for the study. Demographic data included current age, age at the end of service, sex, race/ethnicity, education level, branch of military service, rank at end of service, reason for leaving military service, residence in a rural or urban location, and residence in a military community or not (see Appendix A). The time since leaving was calculated from the difference in current age and age leaving military service. Verification for combat service addressed the theater of operations for combat service, the unit of combat service, military operation specialty, and the number of times that the individual deployed to a combat zone (see Appendix A). Table 2 depicts the verification questions and demographic variables as a method to obtain the data for the control variables.

Table 2

Demographic Questions

Variable	Code	Question	Data source	Measurement level	Measurement scoring
Verification	V1	Theater of operations	Survey	Nominal	OIF/OEF/OND/OIR
	V2	Combat unit	Survey	Nominal	Open response
	V3	MOS	Survey	Nominal	Open response
	V4	Times deployed	Survey	Continuous	Numeric
Demographics	D1	Age (current)	Survey	Continuous	Numeric
	D2	Age (end of service)	Survey	Continuous	Numeric
	D2.1	Time since service	Survey	Continuous	Numeric
	D3	Sex	Survey	Nominal	Male/ female/ transgender
	D4	Race	Survey	Nominal	7 choices
	D5	Education	Survey	Ordinal	6 choices
	D6	Branch of service	Survey	Nominal	7 choices
	D7	Political party	Survey	Nominal	3 choices
	D8	Location	Survey	Nominal	Urban/ rural
	D9	Time in service	Survey	Ordinal	4 choices
	D10	Rank	Survey	Nominal	E1-O10
	D11	Reason for leaving	Survey	Nominal	Voluntary /involuntary

Note. Most questions were derived from official U.S. Department of Defense data.

Informed consent. Participation in the survey requires that the individuals enter into a voluntary agreement to participate in the research via informed consent (see Appendix E). Informed consent was provided on the first page of the survey, which stated the purpose of the survey, a description of the procedures for anonymity and confidentiality specified in the survey as well as directions for completing the survey. The researcher's certificate of completion of the National Institute of Health (NIH) training course on Protecting Human Research Participants will also be included (see Appendix F). Due to the nature of the study, contact information for the Veterans Crisis Line was also be provided on every page of the survey. The Veterans Crisis Line

provides free, confidential care to veterans at any day or time throughout various methods including Short Message Service (SMS) or through the telephone. Additionally, the participants were informed that they can terminate participation in the study at any time as well as an option provided that gives them the option to withdraw their response at the end of the survey.

Participants' involvement was voluntary, and they may skip questions or end the survey at any time throughout the process. If the respondent did agree to the informed consent agreement, then the individual was redirected to a webpage that thanks them for participating and includes the information for the Veterans Crisis Line. At the conclusion of the survey the individual was redirected to the thank you for participating page that includes the Veterans Crisis Line information and the notification that once the survey is closed a five-dollar donation for each participant who completed the survey will be made to the IAVA on their behalf, which is a nonprofit organization for post-September 2001 veterans. I paid the donation, which follows the social-ecological model for the study as well as contributing to the community reintegration for the participants. There were no follow-up procedures for this study. However, the participants had the option to go onto a website created for the study or email the research for results, which was stated on the informed consent page

Data collection. Data was collected through SurveyGizmo, which is a web-based survey site (www.surveygizmo.com). SurveyGizmo is an anonymous website that does not collect names, Internet Protocol (IP) addresses, or any other identifying information

of participants. Links to this survey were posted on Facebook and LinkedIn. The decision to use SurveyGizmo was the various methods of ensuring confidentiality of participants while providing multiple methods to disseminate the survey.

Additionally, SurveyGizmo provided the ability to download the collected data to import into SPSS for statistical analysis. The goal was to collect surveys to reach the minimum sample size of *N*= 245. The survey closed after reaching the minimum sample size, as time permits.

Instrumentation and Operationalization of Constructs

Four complete instruments were used during this study to measure military job satisfaction, post-deployment stressors, post-deployment support level, and civic engagement of service members. The instruments to measure military job satisfaction, post-deployment stressors, and post-deployment support level focus upon past events of the participants. While the questionnaire for civic engagement placed emphasis on current events, attitudes, and behaviors of the participants. This differentiation may help distinguish how the past and present interact while the service member enters into a transition phase at the end of their military service.

Military job satisfaction index. The Facet-Free Job Satisfaction Index was used to measure military job satisfaction (Quinn & Mangione, 1973). This instrument was developed to help understand indicators of employees' unhappiness in a job location as a method of retaining quality employees (Quinn & Mangione, 1973). This scale was

developed from a study that measured the validity of using facets for job satisfaction as facets were emerging as a focus in the literature.

Quinn and Mangione (1973) found that the use of facets (or measures of the importance of different factors relating to job satisfaction) was less relevant or valid to job satisfaction than those that did not use facets. Scarpello and Campbell (1983) corroborated this research and found that single-item measures have a moderate correlation. Wanous, Reichers, and Hudy (1997) re-examined this scale, and with a reliability of 0.80. Additionally, job satisfaction was tested in an active-duty military audience and found that job satisfaction increased significantly from 2002 through 2008 – 65.3% to 70.2% that self-reported satisfaction with their service (Bray, Pemberton, Lane, Hourani, Mattiko, & Babeu, 2010). Additionally, Sanchez's et al. (2004) use of the scale produced a Cronbach alpha of 0.84 and found that results did not vary between Active Duty and National Guard/Reserves personnel. While Alpass, Long, Chamberlain, and MacDonald (1997) had a coefficient alpha of 0.69-0.80 and found that veterans reported less job satisfaction with military service than those on Active Duty.

In the validation of this scale, Quinn and Mangione (1973) interviewed 1,533 American workers and asked five questions about their job satisfaction that did not correspond to a specific facet of the job. The first four had fixed-alternative response categories. The last question was coded by whether or not the participant stated that their current job was their ideal or not. This instrument is of value to the study, even if single-question measures are viewed as subjective because the focus is on whether or not the

individual retains job satisfaction after transitioning out of the military (Quinn, Staines, & McCullough, 1974). This scale is considered to be the weakest of the top four common job satisfaction scales employed because the data was included with the study to assess validity as well as the broad terms contained within the scale, but the Cronbach's Alpha has been found to be between 0.70-0.95 (Ahmad, Oranye, & Danilov, 2017; Kovner, Brewer, Wu, Cheng, & Suzuki, 2006; Price, 1997; Sanchez, Bray, Vincus, & Bann, 2004). However, the broad terms of this scale present an opportunity to measure past employment satisfaction without requiring extraneous data collection.

For this study, all five of the questions were used in the study (see Appendix A). However, the exact wording of the questions will be modified to isolate and emphasize military service as the focus of the study. The modifications include adding the words "the military," which was used previously by Sanchez et al., (2004). These modified questions will enable participants to discuss satisfaction with their military service now that it has been completed. Other job satisfaction scales and measures would not work because they focus upon a multifaceted approach to current job satisfaction and embeddedness, which would be cumbersome for the study and could affect completion efforts of participants. This tool will allow the study to identify how the participant views their military service and look at a facet of the attitudes that may influence community reintegration efforts. Permission to use this scale has been provided (see Appendix C). Table 3 depicts the Military Job Satisfaction Scale, and how I used the scale in its entirety as one of the four scales that will be used in the online survey.

Table 3

Military Job Satisfaction Scale

Code	Question	Data source	Measurement level	Measurement scoring
JS1	Overall satisfaction	Survey	Ordinal	5-point Likert-like
JS2	Recommend to others?	Survey	Dichotomous	Yes / no
JS3	Would redo?	Survey	Dichotomous	Join / not join
JS4	Job measured up?	Survey	Dichotomous	Yes / no
JS5	Ideal job?	Survey	Dichotomous	Yes / no

Note. This scale asks participants about their attitudes towards the military after they have completed military service.

Post-deployment stressors measure. The second scale that I used in this study focuses on the experience of stressful events after the most recent deployment. Post-deployment Life Events will be used to measure after deployment of stressor exposure (Vogt et al., 2012). This is a refinement of the Deployment Risk and Resilience Inventory (DRRI) that was designed for the study of Gulf War I-era military veterans that incorporated a Post-Deployment Stressors Scale (King, King, & Vogt, 2003). The DRRI was developed at the National Center for PTSD as a tool to assess psychosocial risks and resiliency factors for military personnel and veterans that had been deployed to war zones or other hazardous duty environments (King, King, Vogt, Knight, & Samper, 2006). This instrument was developed to assess a military member's exposure to stressful life events after they return from a deployment. These seemingly unrelated events might impact an individual's ability to reintegrate back into the community.

In 2012, the DRRI was modified into the DRRI-2 as a set of multiple scales and measurements to assess the risk and resiliency factors of military members' and veterans'

exposure to a hazardous work environment (Vogt et al., 2012). The coefficient alphas for the scales were 0.93 as a whole, and 0.70 for post-deployment stressors as an individual scale. The post-deployment life events scale was found to have statistically significant associations with depression symptom severity (0.50) and anxiety symptom severity (0.51). This scale uses a dichotomous variable measurement for its 14 questions. The findings of this scale were supported by Bray et al., (2010) for the military population and the effects of stressors upon the life satisfaction of the service members. Additionally, the report found that had been deployed reported significantly more stress than the military population that had not (Bray et al., 2010).

This scale is appropriate for this study as it relates to the community reintegration efforts of veterans following the completion of combat service. Significant stressors that are not job-related or specific to the job may hinder an individual's ability to transition but may not be taken into consideration because of this characteristic. The level of exposure to these life events may prove detrimental to the individual's as well as the support system's efforts and have an impact upon the attitudes and behaviors that the individual has in regard to community reintegration. Approval to use this scale has been granted (see Appendix D). Table 4 depicts the Post-Deployment Stressors Scale, and how I used the scale as the second of four scales that will be used in the online survey.

Table 4

Post-Deployment Stressors Scale

	Question	Data source	Measurement level	Measurement scoring
PDS1	Robbed?	Survey	Dichotomous	Yes / no
PDS2	Sexual assault?	Survey	Dichotomous	Yes / no
PDS3	Divorce?	Survey	Dichotomous	Yes / no
PDS4	Healthcare?	Survey	Dichotomous	Yes / no
PDS5	Natural disaster?	Survey	Dichotomous	Yes / no
PDS6	Partner illness?	Survey	Dichotomous	Yes / no
PDS7	Witnessed violence?	Survey	Dichotomous	Yes / no
PDS8	Lost job?	Survey	Dichotomous	Yes / no
PDS9	Emotional mistreatment?	Survey	Dichotomous	Yes / no
PDS10	Financial issues?	Survey	Dichotomous	Yes / no
PDS11	Mental health issues?	Survey	Dichotomous	Yes / no
PDS12	Legal issues?	Survey	Dichotomous	Yes / no
PDS13	Physically injured?	Survey	Dichotomous	Yes / no
PDS14	Death of friend?	Survey	Dichotomous	Yes / no

Note. This scale asks participants about their experiences following re-deployment from their most recent combat tour.

Post-deployment support scale. This is the third scale that was used in this study, and the second scale from the DRRI-2. The coefficient alphas for the scales were 0.93 as a whole, and 0.93 for post-deployment support as an individual scale. The scale uses a 5-point Likert-like scoring to determine the level of agreement an individual has with each of the ten questions. The post-deployment support scale was found to have

statistically significant associations with depression symptom severity (0.50) and anxiety symptom severity (0.51). DeBeer, Kimbrel, Meyer, Gulliver, and Morisette (2014) found that an individual's perception of post-deployment support had a correlation to suicidal ideation when combined with PTSD-depression symptoms. Luciano and McDevitt-Murphy (2017) examined the association of PTSD with physical health problems, and their findings indicated that post-deployment social support may be protective for both of these issues.

This scale is appropriate for this study as it relates to the community reintegration efforts of veterans following the completion of combat service, and specifically looks at the participant's perception of the civil-military divide. This scale focuses upon the level of connection an individual feels toward their support systems as well as the patriotism an individual may or may not feel once military service has been completed. Feeling like a separate entity from society may hinder an individual's ability to transition, but may not be taken into consideration because of the internal nature of this characteristic (Plumb et al., 2014. Individuals who feel that they are isolated, may not perceive acceptance, or even acknowledge a support network (Nezu et al., 2017). This scale will help determine how integrated an individual may feel that they are within the community as well as their families. Approval to use this scale has been granted (see Appendix D). Table 5 depicts the Post-Deployment Support Scale, and how I used the scale as the third of four scales that will be used in the online survey.

Table 5

Post-Deployment Support Scale

	Question	Data source	Measurement level	Measurement scoring
PDSS1	Feel at home?	Survey	Ordinal	5-point Likert-like
PDSS2	Proud to have served?	Survey	Ordinal	5-point Likert-like
PDSS3	Feel better?	Survey	Ordinal	5-point Likert-like
PDSS4	Good advice?	Survey	Ordinal	5-point Likert-like
PDSS5	People understand the military?	Survey	Ordinal	5-point Likert-like
PDSS6	Talk about experiences?	Survey	Ordinal	5-point Likert-like
PDSS7	Lend me money?	Survey	Ordinal	5-point Likert-like
PDSS8	Help me move?	Survey	Ordinal	5-point Likert-like
PDSS9	Help with chores?	Survey	Ordinal	5-point Likert-like
PDSS10	Others help out?	Survey	Ordinal	5-point Likert-like

Note. This scale asks participants about their experiences following re-deployment from their most recent combat tour

Civic engagement measures. The fourth scale that was adapted for use in this survey measures the perceptions, attitudes, and behaviors of the individual in regards to involvement in community networks. The ESS version 1 questionnaire was used to examine civic engagement as well as community reintegration (Harrison, Quick & Abdallah, 2016; Jowell et al., 2007). The ESS questionnaire measures five social capital domains including political participation, social participation, volunteering and reciprocity, trust, and support (Obeid et al., 2014).

Overall, the reliability for all themes ranged from 0.70 - 0.81 (Jowell et al., 2007. This may indicate that there were some differences in the target populations, which were

the diverse populations within Europe, including immigrants from other parts of the world. This version of the ESS was used to determine attitudes of Europeans about immigration. Furthermore, these domains are similar to what was used in a study that focused upon an immigrant's integration into a new community, which had a range of alpha values from 0.80 to 0.90 (Villalonga-Olives, Adams, & Kawachi, 2016).

The focus of the questionnaire is in the context of social capital for the participant, which is part of the social-ecological system. This questionnaire was modified to fit the United States' political system, was changed to fit an online survey format through the use of Likert-like questions. The European Social Survey foundation headquarters gave permission to use the questionnaire as well as the ability to modify for the country specific audience (see Appendix C).

Additionally, the focus areas of this tool center upon the participants' attitudes and behaviors regarding civic engagement, and will help the study identify the applicable perceptions in regards to community reintegration. The focus of this survey instrument is about how the participant perceives their position in a community and looks at various ways the individual may make connections as a form of social capital. Table 6 depicts the ESS questionnaire, and how I used the scale as the fourth of four scales that will be used in the online survey.

Table 6

European Social Survey Questionnaire

Variable	Code	Question	Data source	Measurement level	Measurement scoring
	PP1	Interested in politics	Survey	Ordinal	5-point Likert-like
	PP2	Political issues?	Survey	Ordinal	5-point Likert-like
	PP3	Local elections?	Survey	Ordinal	5-point Likert-like
	PP4	National elections?	Survey	Ordinal	5-point Likert-like
	PP5	Individual actions?	Survey	Ordinal	5-point Likert-like
	PP6	Political membership?	Survey	Ordinal	5-point Likert-like
	PP7	Good citizen?	Survey	Ordinal	5-point Likert-like
	PP8	Participation ability?	Survey	Ordinal	5-point Likert-like
	PP9	Influence politics?	Survey	Ordinal	5-point Likert-like
	PP10	Emotionally attached?	Survey	Ordinal	5-point Likert-like
Civic engagement	SP1	Interactions?	Survey	Ordinal	5-point Likert-like
	SP2	Social interactions?	Survey	Ordinal	5-point Likert-like
	SP3	Social comparison?	Survey	Ordinal	5-point Likert-like
	SP4	Religious?	Survey	Dichotomous	5-point Likert-like
	SP5	Religious level?	Survey	Ordinal	5-point Likert-like
	SP6	Attend service?	Survey	Ordinal	5-point Likert-like
	SP7	Pray?	Survey	Ordinal	5-point Likert-like
	SP8	Safe?	Survey	Ordinal	5-point Likert-like
	SP9	Health?	Survey	Ordinal	5-point Likert-like
	SP10	Happy?	Survey	Ordinal	5-point Likert-like
	VR1	Contributions?	Survey	Dichotomous	Yes / no
	VR2	Volunteer?	Survey	Dichotomous	Yes / no

Variable	Code	Question	Data source	Measurement level	Measurement scoring
	VR3	Treatment by others	Survey	Ordinal	6-point Likert-like
	VR4	Helpfulness of others?	Survey	Ordinal	6-point Likert-like
Community Reintegration	T1	Trust of others?	Survey	Ordinal	6-point Likert-like
	T2	Trust of institutions	Survey	Ordinal	6-point Likert-like
	S1	Confidante?	Survey	Dichotomous	Yes / no
	S2	Ability to confide?	Survey	Ordinal	6-point Likert-like
	S3	Children	Survey	Dichotomous	Yes / no
	S4	Discuss feelings with family?	Survey	Ordinal	6-point Likert-like
	S5	Discuss feelings with others?	Survey	Ordinal	6-point Likert-like

Note. European Social Survey Questionnaire has five domains: political participation (PP), social participation (SP), volunteering and reciprocity (VR), trust (T), and support (S).

Pilot Test

I conducted a pilot test of the questionnaire before initiating the full study. This helped determine the feasibility of the main elements of the study including recruitment, necessary resources, administrative procedures, and data analysis (Hannon et al., 2017). Additionally, conducting the pilot test helped to establish content validity by ensuring that the response to the survey would help me answer the research question as well as ensuring that the survey questions were nested well with the topic under study. Furthermore, testing the questions before conducting the primary study helped to validate the research question. The participants of the pilot test met the same criteria used in the primary study: combat veterans who deployed in support of either OIF, OEF, OND, or OIR.

The pilot test consisted of combat veteran participants that will complete the five-part online survey. Tewary, Cook, Pandya, and McCurry (2016) used 10% of their projected sample size for inclusion in the pilot test of their training program. This would equal (N=25) veterans. Additionally, assuming an attrition rate of 15% within the pilot test, this number of participants will provide a 68% confidence level that my estimate is accurate within 6 percentage points because I have only one group included in the study (Elridge et al., 2016). Furthermore, this number of participants allowed me to determine the Cronbach's alpha, estimate effect size, and the adequacy of instrumentation (Elridge et al., 2016).

I recruited the participants from Amazon MTurk. I solicited comments, feedback, and recommendations from the study participants for each of the five parts to improve the survey questions as well as the study procedures. I conducted data analysis of the findings from the pilot test by developing a list of statements and grouping the data into themes. I used the information collected during the pilot test only for feasibility purposes, and the findings will not be part of the primary study.

Data Analysis Plan

The primary purpose of this study was to determine the degree that attitudes and behaviors of the combat veteran affect the positive reintegration into communities. Research Question 1: do military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors predict the reintegration level for combat veterans, controlling for age, time since leaving military

service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex? H_0: Military job satisfaction, exposure to post-deployment stressors, post-deployment support, and civic engagement attitudes and behaviors do not the reintegration level for combat veterans. H_A: that military job satisfaction, exposure to post-deployment stressors, post-deployment support, and/or civic engagement attitudes and behaviors do predict the reintegration level for combat veterans.

The SPSS application version 25 was used to understand the relationships and interactions between the variables. The SPSS software provides the analytical ability to complete the statistical tests that will be used to analyze the variables contained within the research question. Additionally, SPSS can test for errors, assumptions to check for normality and identify issues like missing data, outliers, linearity and multicollinearity.

I used an alphanumeric coding process to help organize the data and develop a codebook for the dataset (see Appendix A). Letters were assigned to independent and dependent variables to create an acronym for identifying the variables for the data analysis process (see Table 1). Besides, each item contained within the variables will be numbered. I used several procedures that use the SPSS' test capability of the data including descriptive statistics, bar and pie charts, as well as a scatter-graph. Any errors were found during this process will be recoded and annotated within the following chapter. One specific example will be what to do with questions on the survey that

participants did not answer. I input the mean response for questions that have at least 85% response rate, which is similar to the process used by Riggs (2014).

First, I ran a descriptive analysis to determine the number, range, mean, standard deviation, and variance of the variables. The independent variables (military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement), dependent variable (community reintegration), and the control variables (age, education, rank, time since service, and time in service) were all be continuous or ordinal variables (see Appendix A; Table 1). Political party affiliation, the reason for ending military service, branch of military service, place of residence, sex, and race were measured as nominal variables (see Appendix A; Table 1). This will ensure that the study meets the first two assumptions of a hierarchical multiple regression model (Ray-Mukherjee et al., 2014). The final six assumptions cannot be addressed until the data has been collected. However, there are multiple branches in the procedures for violations of the other assumptions including changing method of analysis, transforming the data, or removing a variable if necessary (Ray-Mukherjee et al., 2014).

The hierarchical multiple regression model was selected to incorporate control variables that have been identified in previous research (Feaver & Gelpi, 2011; Godier et al., 2017; Libin et al., 2017). An individual's age and political party affiliation may impact an individual's attitudes and behaviors regarding civic engagement (Feaver & Gelpi, 2011). While the reason the own transitions out of the military may impact the

willingness or capability of an individual to reintegrate back into the community following termination of military service (Godier et al., 2017; Libin et al., 2017).

After I determine whether or not the assumptions are met as well as the general fit of the model with the data, I then began the process to examine the data. Interpreting the results of the hierarchical multiple regression procedure included analyzing the models in the analysis including the model summary and analysis of variance (ANOVA) tables. This tested whether or not this procedure is a good fit for the data as well as allowed me to examine the models' statistical significance as well as differences between the models (Ray-Mukherjee et al., 2014). The final step was to identify a prediction based on the test results.

RQ1: does military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors predict a correlation to reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

$H_0$1: Military job satisfaction, exposure to post-deployment stressors, post-deployment support, and civic engagement attitudes and behaviors do not predict a correlation to reintegration level for combat veterans.

H_A1: that military job satisfaction, exposure to post-deployment stressors, post-deployment support, and/or civic engagement attitudes and behaviors do predict a correlation to the reintegration level for combat veterans.

RQ1a: Does military job satisfaction predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

$H_0 2$: Military job satisfaction does not predict a correlation to reintegration level for combat veterans.

$H_A 2$: Military job satisfaction does predict a correlation to the reintegration level for combat veterans.

RQ1b: Does exposure to post-deployment stressors predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

$H_0 3$: Exposure to post-deployment stressors does not predict a correlation to reintegration level for combat veterans.

$H_A 3$: Exposure to post-deployment stressors does predict a correlation to reintegration level for combat veterans.

RQ1c: Does post-deployment support level predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

$H_0$4: Post-deployment support level does not predict a correlation to reintegration level for combat veterans.

H_A4: Post-deployment support level, and/or civic engagement attitudes and behaviors does predict a correlation to reintegration level for combat veterans.

RQ1d: Do civic engagement attitudes and behaviors predict a correlation to the reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex?

$H_0$5: Civic engagement attitudes and behaviors does not predict a correlation to reintegration level for combat veterans.

H_A5: Civic engagement attitudes and behaviors does predict a correlation to reintegration level for combat veterans.

Threats to Validity

External Validity

The study had three main threats to external validity; they are selection bias, variable selection, and nonresponse bias. The nonprobability convenience sampling that was done for this study does lead to a selection or volunteer bias that may affect the generalizability of the findings from this study. Recruiting participants from multiple sites online helped mitigate this threat, including LinkedIn and Facebook.

Additionally, the individuals who self-select to participate may present a volunteer bias that may limit generalizability. Facebook has been found to be a location of emerging importance for recruiting younger U.S. veterans, and the value of LinkedIn has been shown as a method of communication of the U.S. military and veterans as individuals transition out of military service (Pedersen, Helmuth, Marshall, Schell, PunKay, & Kurz, 2015). By widening the recruitment pool, incentivizing participation, and allowing participants not to answer questions or quit at any time helped limit the impact of this bias. Furthermore, by using a hierarchical multiple linear regression model for my study, I examined the effect of control variables upon the dependent and independent variables. The additional testing of mediating through simple and multiple linear regression will be conducted to examine the indirect effects of the control variables upon the independent and dependent variables (Gatignon, 2013).

Variable selection may have impacted the generalizability of the findings from this study. Researchers indicated that many of the variables that will be used in this study

had been applied ambiguously in other studies (Elnitsky et al., 2017). One of the methods to limit the effects of this threat will be to provide a precise definition of the variables. This provided clear boundaries between the variables to ensure that the interactions between variables are not due to crossover. One of the ways that this study provided these boundaries was in focus for the variables. Three variables examined past events or beliefs of the participants (military job satisfaction, post-deployment stressors, and post-deployment support level) while the other two variables centered upon the current attitudes and behaviors of the participants (civic engagement and community reintegration).

Nonresponse bias was the final external threat to validity. The study aimed at receiving a completion rate of at least 70%; however, similar studies have found that 25% participation rates are more common for my target population (Phillips, Reddy & Durning, 2015). To meet this objective, the study incentivized participation through the donation to the IAVA, allowed completion through multiple devices, and allowed time for multiple visits, if necessary (Billet et al., 2007). Additionally, I pre-notified potential participants of this study through the various outlets like Facebook and LinkedIn (Phillips, Reddy, & Durning, 2015).

Internal Validity

Three elements of an internal validity challenged the data of the study: maturation, instrumentation, and experimental fatigue. The maturation of the participants presented an area of concern for the study. There was a time lag between when the

participant transitioned out of military service and when they take the survey, which may have affected responses of attitudes and behaviors. One of the mitigations for this issue was the shift in focus within the survey questions, moving from past to present (Cor, 2016). This may have helped the individual remember perceptions and behaviors in the past and also frame their current circumstances. Additionally, time since leaving military service was listed as a control variable to limit the effect of maturation upon the study.

Also, short-term changes were a feature of experimental fatigue. The individual may have experienced factors such as tiredness, boredom, hunger, and inattention. The experimental fatigue of the participants may compound this. This survey will include 75 questions including the demographic and verification questions. This is a significant amount of time and energy to devote to a single survey. The primary mitigating factor for this issue was the compensation, though the individual did not receive direct financial compensation (Billet et al., 2007). Additionally, the question series was broken into smaller areas while taking the survey to help keep the participant from feeling overwhelmed.

Construct Validity

Construct validity had similar challenges to the external validity, which are vague definitions of construct and bias in operationalizing and/or analyzing the data. The major concepts contained in this study have to be well defined to ensure that the study's findings are understood by the researcher and can be replicated in the future. The concepts of community reintegration, civic engagement, and social ecology were crucial

to this study. This study operationalized these concepts by providing clear definitions and limits to the variables. This helped limit the crossover and ambiguity of the findings.

The bias that may occur within the construct often occurs when the study seeks to use a single method to describe, measure, or analyze the data collected. This study sought to mitigate this area of concern by using multiple scales that incorporate two distinct focuses to protect the integrity of the data (Cheung, Burns, Sinclair, & Sliter, 2016). Additionally, the study used multiple variables to understand the context of the reintegration construct as well as how the social-ecological model applies. This provided more understanding in the possible interaction of variables.

Ethical Procedures

A detailed explanation of ethical procedures to conduct the study was provided below. The supervising university's Institutional Review Board (IRB) provided approval before data was collected (Approval: 02-21-19-0315547), and the IRB review process identified any challenges or concerns to minimize risk to human subjects. Informed consent was gathered from every participant before they begin any responses to the survey, and the participants had the right to withdraw from the study at any time during the process. The researcher for the current study completed human subjects training and certification through the NIH. All data collected for the study was kept confidential and anonymous and in two locations. First, it was on a password-protected personal computer, and then the backup was uploaded to a secure Dropbox. Five years after the

completion of my dissertation I will delete the dataset from my possession. No other ethical issues are applicable.

Prescreening process. In an attempt to ensure ethical oversight in the research process, potential participants went through an initial pre-screening process. Potential participants were required to agree they were veterans of the U.S. military, and that they had served at least one combat deployment that took place somewhere during the Gulf War-II era. Participants were also required to have access to the Internet and privacy to take the survey. A written description of consent was on the first page, and consent was required before participants could access the survey. The introduction to the survey was also include a statement of the potential risk involved to take the survey. Risks included discomfort thinking about emotions from combat or post-deployment stressors. In addition to guidelines and directions for taking the survey, notification of the participant's ability to terminate participation in the study at any time was included as well as the ability to withdraw their responses at the end of the survey.

Veterans have access to VA services, and information was provided to access these mental health resources in the invitation, the consent form, and at the close of the survey. Participants were informed of any risk in taking the survey that went beyond risks found in daily life, as well as how privacy will be maintained. Also, disclosures to participants included permissions and approval by Walden University's Institutional Review Board (IRB) to conduct the current study.

Support services. All research participants were veterans that had access to the VA and the Veterans Crisis Line. These supportive resources were shared at the beginning of the study and on each page of the survey, which provided VA resources available to research participants. A link was provided to access the Veterans Crisis Line for participants who may become distressed at any point when completing the survey. Since participants had access to the Internet, veterans also had access to the Veterans Crisis Line through the website or by telephone (phone call or text capabilities). This information was provided at the invitation to the survey, the beginning of the survey, on each page of the survey, and at the end of the survey.

Confidentiality and anonymity. Confidentiality of participant's data occurred by not collecting any names, email addresses, or phone numbers. If a system had revealed the personal information of participants, the goal would be to keep the information private, maintaining confidentiality, as instructed through training from the NIH, and upholding the supervising university's ethical code of conduct. This study used SurveyGizmo to administer the survey, and did not collect IP addresses of participants, which strengthened the confidentiality of the survey instrument.

Data protection. Once the data collection and processing through SPSS, all information was downloaded using encryption and storage on a password-protected personal computer which protected the information from being accessed for use other than analysis in the current study. The supervising institution's Internal Review Board (IRB) requires data retention for five years. The dataset will be deleted after the 5-year

retention period is over. There will be no follow-up procedures for the study. Additionally, participants may contact the researcher by email for the results, or go to the website that was created for the study.

Summary

This study used a quantitative methodology to examine the relationship between the independent, dependent, and control variables, as well as the target population and sampling details. I used a correlation research design to predict if military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors predict reintegration level for combat veterans, controlling for age, time since leaving military service, branch of military service, place of residence, political party affiliation, education level, rank, race, time in service, the reason for ending military service, and sex. The variables were identified and operationalized to show how they will be measured for this study.

Chapter 4 will include a summary of the results of the study, a review of the purpose of the study, the problem statement, and how the research addressed the research question and hypotheses. Also, Chapter 4 will include the details of the data collection process, the assumptions of the hierarchical multiple regression model, and an evaluation of the statistical analysis that was conducted using the SPSS application.

Chapter 4: Results

The purpose of this study was to determine the degree to which attitudes and behaviors of the combat veteran affect the positive reintegration into communities. The hypotheses of the study addressed whether the independent variables (military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors) predicted the reintegration level for combat veterans. This chapter includes the results of the data analysis conducted to address the following research questions:

RQ1: Does military job satisfaction, exposure to post-deployment stressors, post-deployment support level, and civic engagement attitudes and behaviors predict a correlation to reintegration level for combat veterans?

RQ1a: Does military job satisfaction predict a correlation to reintegration level for combat veterans?

RQ1b: Does exposure to post-deployment stressors predict a correlation to reintegration level for combat veterans?

RQ1c: Does post-deployment support level predict a correlation to reintegration level for combat veterans?

RQ1d: Does civic engagement attitudes and behaviors predict a correlation to reintegration level for combat veterans?

This chapter covers three key areas for the study: the pilot test, data collection, and the results of the study. Data were collected in two phases. Phase 1 was the pilot test,

which was run to ensure the feasibility of the instruments. Phase 2 was the full study, which was conducted to assess the correlations between the independent variables and dependent variable and to make predictions based on the results while controlling for covariates.

Data Collection

Pilot Test

A pilot test was conducted through the Amazon Mturk crowdsourcing marketplace as a method of obtaining quality survey respondents, which is a form of panel research. There were 191 responses to the request for participants; however, due to the stringent verification requirements of the study, only 25 surveys were accepted for use (see Table 2). The results of the pilot test were used to determine the feasibility of the four survey instruments, to ensure the fit of the analytical model, to identify any ambiguities in the survey questions, and to ease the use of the survey.

The primary focus of the pilot test was to examine the reliability of the survey instruments in measuring the four independent variables and dependent variable. The Cronbach's alpha of all four instruments met the threshold for reliability: community reintegration ($\alpha = 0.802$), civic engagement ($\alpha = 0.898$), post-deployment support ($\alpha = 0.822$), post-deployment stressors ($\alpha = 0.731$), and military job satisfaction ($\alpha = 0.702$). This indicated that no changes in instrumentation were required.

The data was processed and analyzed using the hierarchical multiple linear regression model to determine how well the data fit the model (see Table 7). The data

met all of the assumptions for the model and produced statistically significant results (see Table 8). The univariate linear regression models to compare the four independent variables in isolation against the dependent variable were not used based on the small sample size. The findings from the pilot test indicated that no changes in data analysis strategies were needed.

Table 7

Descriptive Statistics of the Pilot Test

	Mean	*SD*	Min	Max
Community reintegration	48.68	2.76	6.38	70.21
Civic engagement	55.45	2.77	32.82	90.08
Post-deployment support	81.04	2.15	62	100
Post-deployment stressors	32.29	3.74	.00	71.43
Military job satisfaction	78.67	4	71.43	100

Note. $N = 25$, $*p < .05$, $**p < .01$.

Table 8

One-Way Analysis of Variance for the Pilot Test

Model		*df*	*SS*	*MS*	*F*
1	Regression	4	2344.52	586.13	5.26**[a]
	Residual	20	2230.58	111.53	
	Total	24	4575.10		
2	Regression	4	4503.69	225.19	12.61**[b]
	Residual	20	71.41	17.85	
	Total	24	4575.10		

Note. $N = 25$, $*p < .05$, $**p < .01$

a. Predictors: Military job satisfaction, Post-deployment stressors, Post-deployment support, Civic Engagement
b. Predictors: Military Job Satisfaction, Post-Deployment Stress, Post-Deployment Support, Civic Engagement, age, time since service, time in service, branch, residence, political party, education, rank, ending military service, sex, race

Response Rate

According to the U.S. Census Bureau (2017), there are approximately 3.3 million combat veterans who served during the Gulf War II era. The full study was posted on two social media sites: Facebook and LinkedIn. There were 1,381 responses to the request for participants, and 654 surveys were completed. This indicated a response rate of 47%. Of the 654 completed surveys, 255 met the verification requirements, which was a 39% rate of acceptance. Veterans who denied combat experience ($n = 145$) or who inaccurately responded to verification questions ($n = 254$) were not included in the study. The incorrect responses, including to central questions of deployment theater and branch of

military service, were used to ensure the integrity of the study by confirming that participants read the questions and understood what was being asked of them (see Ramsey, Thompson, McKenzie, & Rosenbaum, 2016). This response rate provided an adequate sample size to conduct the study because the sample size goal was 245.

Participation Information

On February 20, 2019, I created a website and posted a pre-introduction letter 2 weeks before the pilot test began. Links to the website were posted on social media to direct prospective participants to information about the survey. The pilot test was conducted from March 6th to 7th, 2019. While the pilot test was occurring, the page was promoted on various social media platforms to increase the visibility of the study. Ads and information letters about the study were posted on Facebook and LinkedIn and placed in several veteran-focused locations including VA medical centers and Veteran Service Organizations. After the pilot test was concluded, the links for the full study were opened for participation on SurveyGizmo. Participants were given a 3-week window to complete the study, which was conducted from April 2nd to 16th, 2019.

Demographics

The sample for this study comprised Gulf War II era combat veterans ($N = 255$). Most of the participants were enlisted (82%), male (81%), and White (82%). Participants had a mean age of 37 ($SD = 7.07$). Most participants had completed at least the initial military contract (39%), had been out of military service for 6.69 years ($SD = 4.55$), were Republican (46%), were living in a suburban (48%) nonmilitary community (72%), and

94% had at least some college education (*SD* = 0.51). The number of self-reported White participants was higher than statistics reported by the U.S. Department of Defense (2017), which listed the White race as composing 70% of the military community. Additionally, the education level of the participants was higher (55% had at least a bachelor's degree) than the average reported by the U.S. Department of Defense, which indicated that 76% of the military has completed at least some college, but less than 20% had at least a bachelor's degree (see Figure 1).

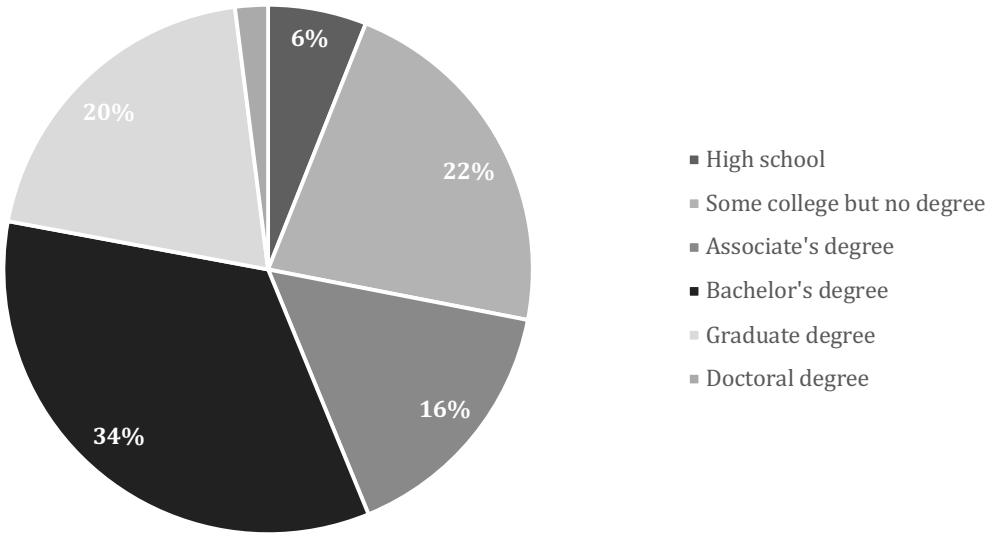

Figure 1: Self-reported education level.

The reasons for leaving military service had slightly different statistics than what the U.S. Department of Defense released in 2017. The Department of Defense reported that 48% of separations were voluntary, 14% were retirement, and 26% were involuntary.

The study's responses indicated that 51% of the separations were voluntary, 14% were retirement, and 35% were involuntary (see Figure 2).

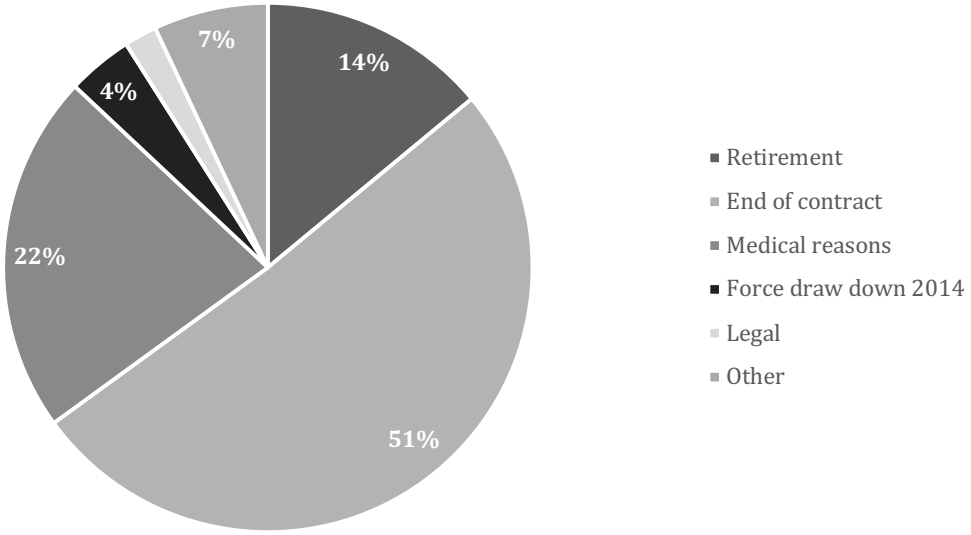

Figure 2: Self-reported reasons for ending military service.

The U.S. Army was the most common branch of military service (46%), and Operation Iraqi Freedom was the most predominant combat zone response for the study (53%) (see Figures 3, 4). These responses align with the number of individuals deployed to combat zones during the Gulf War II-era reported by the U.S. Department of Defense (2017).

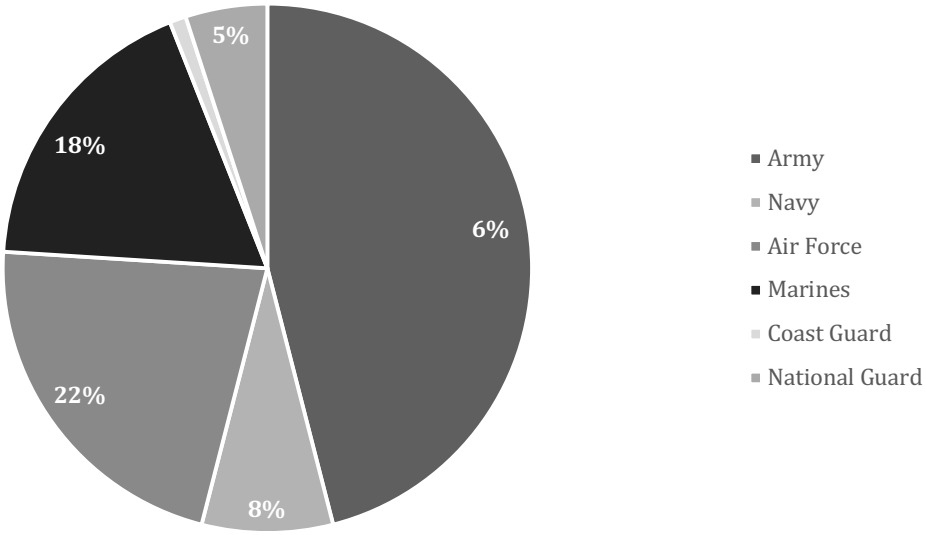

Figure 3: Branch of military service.

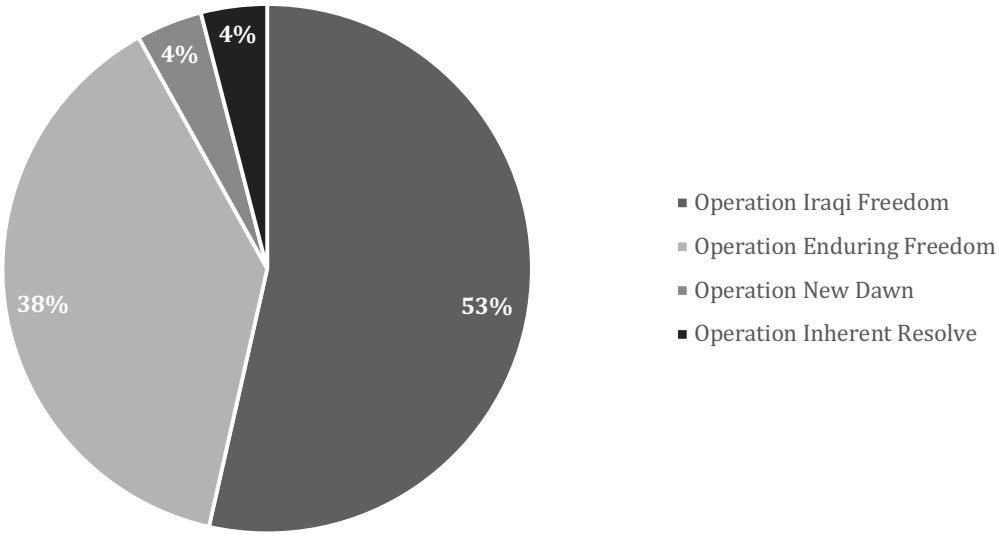

Figure 4: Theater of combat operations.

Results

Descriptive Statistics

Mean and standard deviation for independent and dependent variables were reported in Table 9. Military job satisfaction was a scale of 5 items (α=0.736). The mean score for military job satisfaction was 78.95, with a minimum score of 11.11 and a maximum score of 100. However, an extremely high positive skew was identified (Cain, Zhang, & Yuan, 2017). Post-deployment stressors level was a scale of 14 items (α=0.783). The mean score of post-deployment stressors was 31.71 with a minimum score of 0 and a maximum score of 100. However, a moderately negative skew was identified (Cain, Zhang, & Yuan, 2017). Post-deployment support level was a scale of 10 items (α=0.891). Post-deployment support had a mean score of 79.15 with a minimum of 24 and a maximum of 100. However, a highly negative skew was identified (Cain, Zhang, & Yuan, 2017). Civic engagement level was a scale of 24 questions (α=0.846). Civic engagement had a mean score of 58.58 with a minimum of 32.82 and a maximum of 90.08. Community reintegration level was a scale of 7 questions (α=0.781). The community reintegration mean score was 46.47 with a minimum of 6.38 and a maximum of 78.72.

Table 9

Independent and Dependent Variables Descriptive Statistics of the Full Study

	Mean	*SD*	Min	Max	Skewness	Kurtosis
Military job satisfaction	78.95	18.24	11.11	100	-1.114	0.873
Post-deployment stressors	31.71	20.48	0	100	0.559	-0.095
Post-deployment support	79.15	14.27	24	100	-0.931	1.220
Civic engagement	58.58	9.57	32.82	90.08	0.102	0.271
Community reintegration	46.47	13.1	6.38	78.72	-0.05	-0.043

Note. N=255, *p<.05, **p<.01

Statistical Assumptions

Research Question 1. The central research question examines all four independent variables together against the dependent variable to determine if a prediction may be made in a step-wise methodological approach. There were five steps or models for this test. The first step was the independent variable post-deployment support in isolation against the dependent variable, community reintegration. The second step added the independent variable post-deployment stressors to post-deployment support against community reintegration. The third step added civic engagement to the previous two independent variables against the dependent variable. The fourth step added the final independent variable, military job satisfaction to the other three independent variables against community reintegration. The fifth step was the addition of the control variables to the four independent variables (see Table 11). The test for the assumption of independence of observation was conducted. There was an independence of residuals, as assessed by a Durbin-Watson statistic of 1.524.

Scatterplots were run to determine if a collective linear relationship existed between the dependent and independent variables (see Figure 5). A collective linear relationship was found, as were linear relationships between the dependent variable and each of the independent and control variables using partial regression plots. This allows the null hypothesis to be rejected. Additionally, homoscedasticity was found, as assessed by a visual inspection of the plot of studentized residuals versus unstandardized predicted values (see Figure 5).

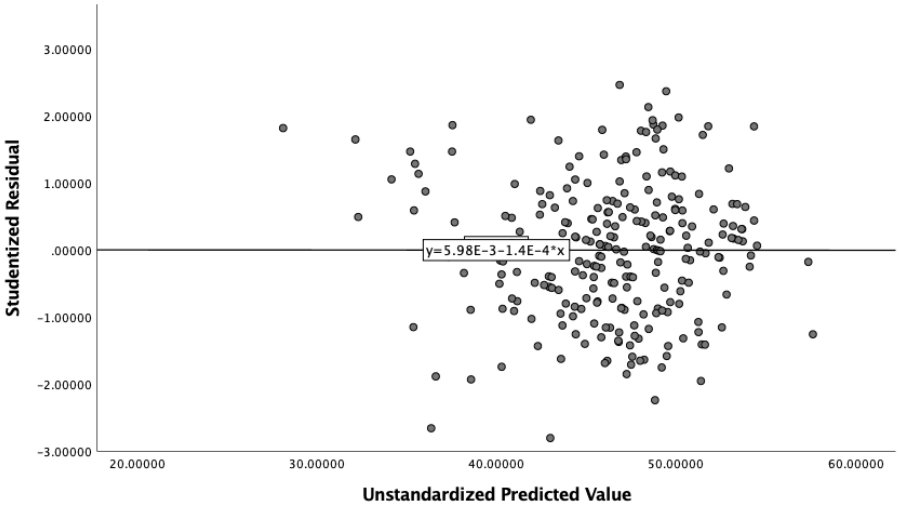

Figure 5. Scatterplot test for linearity.

A test for the assumption of no multicollinearity problems was conducted by examining the Tolerance and Variance Inflation Factors (VIF). There was no evidence of multicollinearity, as assessed by tolerance values greater than 0.1, and all of the VIFs were below 2. There were no studentized deleted residuals greater than ±3 standard deviations, no leverage values greater than 0.2, and values for Cook's distance above 1.

The test for normality was robust because of the skewness detected in the descriptive statistics for three of the independent variables (military job satisfaction, post-deployment stressors, and post-deployment support). The default analysis was conducted first, including the histogram and P-P Plot. Visual inspection of the histogram indicated that the standardized residuals appeared to be normally distributed (see Figure 6). The P-P Plot appeared almost perfectly aligned (see Figure 7). In addition, a Q-Q Plot was run that produced very similar results to the P-P Plot. Due to these tests, the distribution was found to be approximately normally distributed.

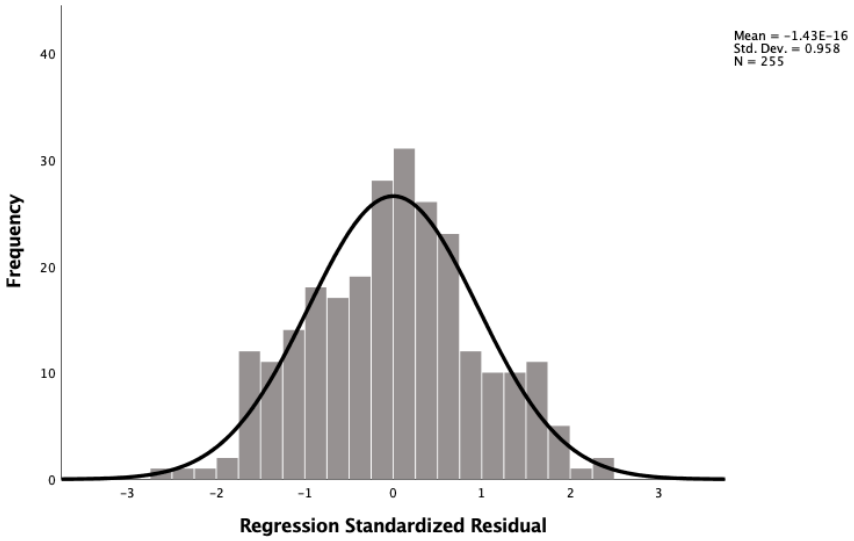

Figure 6. Histogram of community reintegration scores.

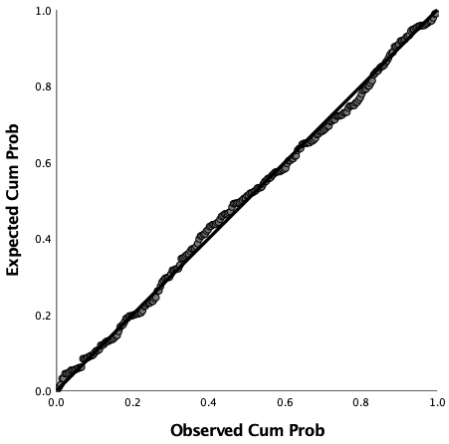

Figure 7. P-P plot of studentized residuals,

Research Question 1a. Military job satisfaction was run by itself against the dependent variable to determine if a prediction may be made when running a single independent variable in isolation against the dependent variable and in conjunction with the control variables (Barton, Yeatts, Henson, & Martin, 2016). Two models were produced based on a step-wise methodological approach to the hierarchical univariate linear regression model (see Table 12). The test for the assumption of independence of observation was conducted. There was an independence of residuals, as assessed by a Durbin-Watson statistic of 1.539.

Scatterplots were run to determine if a collective linear relationship existed between the dependent and independent variables. A collective linear relationship was found, as were linear relationships between the dependent variable and each of the independent and control variables using partial regression plots. This allows the null hypothesis to be rejected. Additionally, homoscedasticity was found, as assessed by a

visual inspection of the plot of studentized residuals versus unstandardized predicted values.

A test for the assumption of no multicollinearity problems was conducted by examining the Tolerance and Variance Inflation Factors (VIF). There was no evidence of multicollinearity, as assessed by tolerance values greater than 0.1, and all of the VIFs were below 2. There were no studentized deleted residuals greater than ±3 standard deviations, no leverage values greater than 0.2, and values for Cook's distance above 1.

The default test for normality was conducted as the robust test for the central research question revealed a normal distribution of residuals. The default analysis was conducted first, including the histogram and P-P Plot. Visual inspection of the histogram indicated that the standardized residuals appeared to be normally distributed, and the P-P Plot was relatively aligned.

Research Question 1b. Post-deployment stressors level was run by itself against the dependent variable to determine if a prediction may be made when running a single independent variable in isolation against the dependent variable and in conjunction with the control variables (Barton, Yeatts, Henson, & Martin, 2016). Two models were produced based on a step-wise methodological approach to the hierarchical univariate linear regression model (see Table 13). The test for the assumption of independence of observation was conducted. There was an independence of residuals, as assessed by a Durbin-Watson statistic of 1.599.

Scatterplots were run to determine if a collective linear relationship existed between the dependent and independent variables. A collective linear relationship was found, as were linear relationships between the dependent variable and each of the independent and control variables using partial regression plots. This allows the null hypothesis to be rejected. Additionally, homoscedasticity was found, as assessed by a visual inspection of the plot of studentized residuals versus unstandardized predicted values.

A test for the assumption of no multicollinearity problems was conducted by examining the Tolerance and Variance Inflation Factors (VIF). There was no evidence of multicollinearity, as assessed by tolerance values greater than 0.1 and all of the VIFs were below 2. There were no studentized deleted residuals greater than ±3 standard deviations, no leverage values greater than 0.2, and values for Cook's distance above 1.

The default test for normality was conducted as the robust test for the central research question revealed a normal distribution of residuals. The default analysis was conducted first, including the histogram and P-P Plot. Visual inspection of the histogram indicated that the standardized residuals appeared to be normally distributed, and the P-P Plot was relatively aligned.

Research Question 1c. Post-deployment support level was run by itself against the dependent to determine if a prediction may be made when running a single independent variable in isolation against the dependent variable and in conjunction with the control variables (Barton, Yeatts, Henson, & Martin, 2016). Two models were

produced based on a step-wise methodological approach to the hierarchical univariate linear regression model (see Table 14). The test for the assumption of independence of observation was conducted. There was an independence of residuals, as assessed by a Durbin-Watson statistic of 1.564.

Scatterplots were run to determine if a collective linear relationship existed between the dependent and independent variables. A collective linear relationship was found, as were linear relationships between the dependent variable and each of the independent and control variables using partial regression plots. This allows the null hypothesis to be rejected. Additionally, homoscedasticity was found, as assessed by a visual inspection of the plot of studentized residuals versus unstandardized predicted values.

A test for the assumption of no multicollinearity problems was conducted by examining the Tolerance and Variance Inflation Factors (VIF). There was no evidence of multicollinearity, as assessed by tolerance values greater than 0.1, and all of the VIFs were below 2. There were no studentized deleted residuals greater than ±3 standard deviations, no leverage values greater than 0.2, and values for Cook's distance above 1.

The default test for normality was conducted as the robust test for the central research question revealed a normal distribution of residuals. The default analysis was conducted first, including the histogram and P-P Plot. Visual inspection of the histogram indicated that the standardized residuals appeared to be normally distributed, and the P-P Plot was relatively aligned.

Research Question 1d. Civic engagement was run by itself against the dependent variable to determine if a prediction may be made when running a single independent variable in isolation against the dependent variable and in conjunction with the control variables (Barton, Yeatts, Henson, & Martin, 2016). Two models were produced based on a step-wise methodological approach to the hierarchical univariate linear regression model (see Table 15). The test for the assumption of independence of observation was conducted. There was an independence of residuals, as assessed by a Durbin-Watson statistic of 1.583.

Scatterplots were run to determine if a collective linear relationship existed between the dependent and independent variables. A collective linear relationship was found, as were linear relationships between the dependent variable and each of the independent and control variables using partial regression plots. This allows the null hypothesis to be rejected. Additionally, homoscedasticity was found, as assessed by a visual inspection of the plot of studentized residuals versus unstandardized predicted values.

A test for the assumption of no multicollinearity problems was conducted by examining the Tolerance and Variance Inflation Factors (VIF). There was no evidence of multicollinearity, as assessed by tolerance values greater than 0.1, and all of the VIFs were below 2. There were no studentized deleted residuals greater than ±3 standard deviations, no leverage values greater than 0.2, and values for Cook's distance above 1.

The default test for normality was conducted as the robust test for the central research question revealed a normal distribution of residuals. The default analysis was conducted first, including the histogram and P-P Plot. Visual inspection of the histogram indicated that the standardized residuals appeared to be normally distributed, and the P-P Plot was relatively aligned.

Findings

Research Question 1. The full model of military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement with the control variables (age, time since leaving service, time in service, branch of military service, place of residence, political party affiliation, education level, rank, ending military service, sex, race) to predict community reintegration (Model 5) was statistically significant, $R^2 = 0.126$, $F(21, 233) = 1.6$, $p < .05$, adjusted $R^2 = 0.047$ (see Tables 1, 10, 11). However, it was a very small effect size as determined by Sawilowsky (2009).

Table 10

One-Way Analysis of Variance – Research Question 1

Model		*df*	*SS*	*MS*	*F*
1	Regression	1	2721.45	2721.45	16.85**[a]
	Residual	253	40865.73	161.53	
	Total	254	43587.18		
2	Regression	2	3099.55	1549.78	9.65**[b]
	Residual	252	40487.63	160.67	
	Total	254	43587.18		
3	Regression	3	3102.30	1034.10	6.41**[c]
	Residual	251	40484.88	161.29	
	Total	254	43587.18		
4	Regression	4	3174.92	793.73	4.91**[d]
	Residual	250	40412.26	161.65	
	Total	254	43587.18		
5	Regression	21	5493.34	261.59	1.6*[e]
	Residual	233	38093.84	163.49	
	Total	254	43587.18		

Note. N=255, *p<.05, **p<.01

a. Predictors: Post-deployment support
b. Predictors: Post-deployment support, Post-deployment stressors
c. Predictors: Post-deployment support, Post-deployment stressors, Civic engagement
d. Predictors: Post-deployment support, Post-deployment stressors, Civic engagement Military job satisfaction
e. Predictors: Post-deployment support, Post-deployment stressors, Civic engagement Military job satisfaction, age, time since service, time in service, branch, residence, political party, education, rank, ending military service, sex, race

Table 11

Hierarchical Multiple Regression Predicting Community Reintegration from Post-Deployment Support, Post-Deployment Stressors, Civic Engagement, and Military Job Satisfaction

	Model 1		Model 2		Model 3		Model 4		Model 5	
Variable	*B*	β	*B*	β	*B*	β	*B*	β	*B*	β
Constant	-20.52		-12.17		-12.2		-9.316		-19.34	
Post-deployment support	35.45	0.25**	32.06	0.23**	31.73	0.22**	30.93	0.22**	32.82	0.23**
Post-deployment stressors			-0.06	-0.1	-0.06	-0.1	-0.06	-0.1	-0.07	-0.11
Civic Engagement					0.01	0.01	0.01	0.01	-0.03	-0.02
Military job satisfaction							-77.18	-0.04	-69.03	-0.04
Age									0.02	0.1
Time since service									-0.14	-0.05
Time in service									1.4	0.09
Branch									-0.21	-0.02
Residence									-1.81	-0.1
Political party									0.11	0.01
Education									4.9	0.19*
Rank									1.35	0.13*
Reason for leaving military									-1.12	-0.04
Sex									0.4	0.03
Race										
R^2	0.06		0.07		0.07		0.07		0.13	
F	16.86**		9.65**		6.41**		4.91**		1.6*	
ΔR^2	0.06		0.01		0.00		0.00		0.05	
ΔF	16.86**		2.35		0.02		0.45		0.83	

Note. $N=255$, $^*p<.05$, $^{**}p<.01$

Research Question 1a. The full model of military job satisfaction with the control variables (age, time since leaving service, time in service, branch of military service, place of residence, political party affiliation, education level, rank, ending military service, sex, race) to predict community reintegration (Model 2) was not statistically significant, $R^2 = 0.064$, $F(17, 237) = 0.95$, $p = 0.52$, adjusted $R^2 = -0.001$ (see Table 12). It had a very small effect size as determined by Sawilowsky (2009).

Table 12

Hierarchical Linear Regression Predicting Community Reintegration from Military Job Satisfaction

	Model 1		Model 2	
Variable	*B*	β	*B*	β
Constant	40.98		34.32	
Military job satisfaction	0.07	0.1	0.7	0.1
Age			0.01	0.00
Time since service			-0.15	-0.05
Time in service			1.22	0.08
Branch			-0.32	-0.04
Residence			-1.37	-1.12
Political party			0.26	0.02
Education			4.12	0.16**
Rank			-0.54	0.13
Reason for leaving military			1.29	0.13*
Sex			-1.75	-0.05
Race			0.37	0.03
R^2	0.01		0.06	
F	2.39		0.95	
ΔR^2	0.01		0.05	
ΔF	2.39		0.86	

Note. $N=255$, $*p<.05$, $**p<.01$

Research Question 1b. The full model of post-deployment stressors with the control variables (age, time since leaving service, time in service, branch of military service, place of residence, political party affiliation, education level, rank, ending military service, sex, race) to predict community reintegration (Model 2) was statistically significant, $R^2 = 0.10$, $F(17, 235) = 1.52$, $p<0.05$, adjusted $R^2 = 0.03$ (see Table 13). It had a very small effect size as determined by Sawilowsky (2009).

Table 13

Hierarchical Linear Regression Predicting Community Reintegration from Post-Deployment Stressors

	Model 1		Model 2	
Variable	*B*	β	*B*	β
Constant	44.21		44.48	
Post-deployment stressors	-0.94	0.16*	-1.12	0.19**
Education	3.45	0.14*	4.03	0.16*
Age			0.07	0.04
Time since service			-0.07	-0.03
Time in service			1.18	0.08
Branch			-0.49	-0.06
Residence			-1.44	-0.08
Political party			0.4	0.03
Rank			-0.348	-0.13
Reason for leaving military			0.78	0.08
Sex			-1.94	-0.06
Race			1.54	0.11
R^2	0.05		0.1	
F	6.31		1.52	
ΔR^2	0.05		0.05	
ΔF	6.31		0.88	

Note. N=255, $*p<.05$, $**p<.01$

Research Question 1c. The full model of post-deployment support with the control variables (age, time since leaving service, time in service, branch of military service, place of residence, political party affiliation, education level, rank, ending military service, sex, race) to predict community reintegration (Model 2) was statistically significant, $R^2 = 0.14$, $F(17, 235) = 2.21$, $p<0.001$, adjusted $R^2 = 0.08$ (see Table 14). It had a very small effect size as determined by Sawilowsky (2009).

Table 14

Hierarchical Linear Regression Predicting Community Reintegration from Post-Deployment Support

	Model 1		Model 2	
Variable	*B*	β	*B*	β
Constant	49.72		50.31	
Post-deployment support	-7.94	0.26**	-8.44	-0.28**
Education	3.04	0.12*	3.5	0.14*
Age			0.06	0.03
Time since service			-0.22	-0.08
Time in service			1.72	0.12
Branch			-0.43	-0.05
Residence			-1.34	-0.08
Political party			-0.02	-0.001
Rank			-0.24	-0.09
Reason for leaving military			1.16	0.1
Sex			-2.47	-0.08
Race			0.94	0.07
R^2	0.09		0.14	
F	12.22		2.21	
ΔR^2	0.09		0.05	
ΔF	12.22		0.88	

Note. $N=255$, $*p<.05$, $**p<.01$

Research Question 1d. The full model of civic engagement with the control variables (age, time since leaving service, time in service, branch of military service, place of residence, political party affiliation, education level, rank, ending military service, sex, race) to predict community reintegration (Model 2) was not statistically significant, $R^2 = 0.07$, $F(17, 235) = 1.08$, $p= 0.38$, adjusted $R^2 = 0.02$ (see Table 15). It had a very small effect size as determined by Sawilowsky (2009).

Table 15

Hierarchical Linear Regression Predicting Community Reintegration from Civic Engagement

	Model 1		Model 2	
Variable	*B*	β	*B*	β
Constant	33.51		35.67	
Civic engagement	0.1	0.07	0.09	0.07
Education	3.46	1.57*	4	0.16*
Age			0.06	0.03
Time since service			-0.2	-0.07
Time in service			1.13	0.08
Branch			-0.54	-0.06
Residence			-0.11	-0.004
Political party			0.11	0.01
Rank			2.78	0.08
Reason for leaving military			0.83	0.08
Sex			-2.32	-0.08
Race			1.23	0.09
R^2	0.03		0.07	
F	3.62		1.08	
ΔR^2	0.03		0.04	
ΔF	3.62		0.74	

Note. $N=255$, $*p<.05$, $**p<.01$

Summary

The purpose of this chapter was to analyze the data collected through the survey. The sample size was adequate to conduct the study, and the data met all the assumptions of the hierarchical multiple linear regression model. Results showed that the full models of the central research question (military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement to predict community reintegration), post-deployment stressors, and post-deployment support were statistically significant.

Chapter 5: Discussion, Conclusions, and Recommendations

In this chapter, I situate the results of the study within the larger context of the literature and discuss the conclusions and recommendations for future research of community reintegration efforts of veterans. The purpose of this study was to determine the degree to which attitudes and behaviors of the combat veteran affect the positive reintegration into communities. This research was intended to expand the body of knowledge for future practitioners and developing programs and services for U.S. veterans and community reintegration efforts of transitioning service members back into civilian communities.

Interpretation of the Findings

Several associations between variables were identified in the study. When considering the core research question that addressed the relationships between the independent variables (military job satisfaction, post-deployment stressors, post-deployment support, and civic engagement) and dependent variable (community reintegration), I observed statistically significant findings. Overall, post-deployment support level appeared to have a positive relationship with community reintegration throughout the five models that were used to examine the variables. This was consistent with Pugh et al.'s (2018) finding regarding perceived support and community reintegration. Additionally, in the fifth model that included all of the control variables, an association was identified between community reintegration and the education and the rank of the veteran. This confirmed the findings of Rattray et al. (2019) that the higher

levels of education may have a significant positive relationship between a veteran and their community reintegration.

When viewing the relationship between the individual independent variables and community reintegration and control variables, I discovered several key associations. With military job satisfaction and community reintegration, there were two associations detected. A positive relationship was found between education level and the reason the individual ended military service. The association with education was also statistically significant with civic engagement.

I also found statistically signification associations between post-deployment stressors and education in regards to community reintegration. Post-deployment stressors as well as post-deployment support levels, had a negative relationship with community reintegration while education was found to have a positive relationship. These findings were consistent with Pugh et al.'s (2018) assertion that support may have an impact on an individual's reintegration. However, an interesting relationship was that unlike the full model that included all the independent variables and control variables, post-deployment support level had a negative relationship with community reintegration.

However, I was unable to delineate any statistically significant changes in community reintegration scores with the addition of variables in the various models of the research questions. None of the key predictors identified in this study created a significant change in the prediction of community reintegration levels. These findings contrasted with Sanchez et al. (2004) and DeViva et al. (2016), who found that certain

aspects of a military member's experience could impact successful community reintegration.

Identifiers of age and political party affiliation were not found to have any significant impact on predicting the community reintegration level of an individual. Although Feaver and Gelpi (2011) determined that age and political party affiliation may have significant impact on a veteran's civic engagement and community reintegration, the results of the current study did not support these findings. Godier et al. (2017) and Libin et al. (2017) suggested that the reasons an individual transitioned out of military service may affect his or her future community reintegration. I did not find any evidence to support these assertions within the predictive analysis modeling; however, when considering military job satisfaction in isolation, I found an association between community reintegration and the reason that the individual ended his or her military service.

Limitations of the Study

The main limitations of my study were the study design, the measurement tools that I used, and the method of obtaining participants. One of the reasons why the study was not able to produce significant results for community reintegration may have occurred due to the cross-sectional research design that I used. My study included a snapshot of the participants' attitudes and behaviors toward community reintegration. Additionally, there was a significant time period between when the individual transitioned out of military service and when the survey was taken, which was

approximately 6.6 years. A longitudinal study that began at the point of transition and followed participants after they reintegrated back into the civilian community may have provided enough information for a model with accurate prediction.

Measurement is one of the greatest challenges in social science research because of the complexity and variability of the understanding of key concepts (Rutherford & Bu, 2018). Applying community reintegration and civic engagement to a military population is a relatively new practice, and the concepts need to be uniformly defined to guide future research. The definitions that I used in my study may not have encompassed the concept, which could have influenced my findings. In addition, my measurement tools for community reintegration and military job satisfaction had acceptable, but relatively low, reliability scores ($\alpha = 0.781$ and $\alpha = 0.736$, respectively).

The third limitation of the study was how I obtained my participants. I used social media sites for recruitment, which are targeted toward a younger audience (Chang, Yu, & Lu, 2015). However, there was a wide range of possible generations that composed the 18-65 age group that I targeted for my study. Additionally, research indicated that veterans, especially those with difficulties relating to military service, may be unwilling or unable to connect with other people, even with the distance offered by a virtual presence (Godier et al., 2017; Libin et al., 2017). Furthermore, perceived incentives may impact an individual's desire to participate in the online survey, even if unqualified, as a method of obtaining some benefit (Pecáková, 2016).

Recommendations

Currently, U.S. veterans total over 18 million, which is approximately 5.5% of the U.S. population according to the U.S. Census Bureau (2017). Many of these veterans have been exposed to experiences and cultures that their civilian counterparts have not, which may lead to attitudes and behaviors that may cause conflicts within civilian communities. Veterans reintegrate throughout the United States, and it is important to create a baseline for the military services to better prepare future veterans as well as the civilian communities for reintegration.

In this study, I examined how factors intrinsic to military service may affect community reintegration as a means to better predict an individual's community reintegration level. The response rate was 47% of 654 participants; however, there was a misunderstanding of the identity of a combat veteran as well as military service. This may have been due to the conflicting identifications of veterans based on eras of service, which may have provided a blanket identification of all service members during a certain period, especially a major conflict period, as wartime veterans although the individual was not deployed to a combat zone. Educating potential participants regarding the specific definition may be helpful for future research.

Additionally, a longitudinal study would help determine the degrees of change veterans undergo throughout the transition process in regards to their community reintegration attitudes and behaviors. This would provide a more intrinsic look into the

process, and better identify commonalities between veterans as a means to create a more accurate prediction model.

Furthermore, the next step for research may be a qualitative study into veterans' perceptions of both civic engagement and community reintegration to help identify the ambiguities described by this study's findings when conducting the predictive analysis of community reintegration. Due to the relatively short period that community reintegration has been a focus for military transition, there are gaps in the universality of key concepts that may need to be clarified before an individual begins participation.

Implications

This study contributed data on which factors should be given consideration in identifying elements for educating transitioning service members who are reintegrating back into civilian communities. This cross-sectional study was important because it identified that the current perception of community reintegration may need to be further refined as a means to measure the phenomena appropriately.

After conducting this study, it appears that it may be more useful for future studies to focus solely on the civic engagement and/or community reintegration aspects of reintegration. These may allow researchers to broaden the concepts to more comprehensively measure the effects of attitudes and behaviors of veterans during the reintegration process.

Conclusions

The purpose of this study was to determine the degree that attitudes and behaviors of the combat veteran affect the positive reintegration into communities. There were statistically significant findings identified by this study as a means to conduct predictive analysis of a combat veteran's community reintegration as well as key associations including post-deployment support, education, rank, and the reason an individual transitioned out of military service in relation to community reintegration. Further research should be conducted that broaden the concepts of community reintegration and civic engagement to understand the transition process of service members to veterans. This would allow future researchers to study how external and internal factors impact a veteran's ability to reintegrate back into the civilian community as a means of improving the transition process for future veterans.

References

Abraham, T., Cheney, A. M., & Curran, G. M. (2015). A Bourdieusian analysis of U.S. military culture ground in the mental help-seeking literature. *American Journal of Men's Health*, *11*(5), 1358-1365. doi:10.1177/1557988315596037

Adler, R. P., & Goggin, J. (2005). What do we mean by "civic engagement"? *Journal of Transformative Education*, *3*(3), 236-253. doi:10.1177/1541344605276792

Ahern, J., Worthen, M., Masters, J., Lippman, S. A., Ozer, E. J., & Moos, R. (2015). The challenges of Afghanistan and Iraq veterans' transition from military to civilian life and approaches to reconnection. *PLoS One*, *10*(7), e0128599. doi:10.1371/journal.pone.0128599

Ahmad, N., Oranye, N. O., & Danilov, A. (2017). Rasch analysis of Stamps's Index of Work Satisfaction in nursing population. *Nursing Open*, *4*(1), 32-40. doi:10.1002/nop2.61

Albertson, K. Irving, J., & Best, D. (2015). A social capital approach to assisting veterans through recovery and desistance transitions in civilian life. *Howard Journal of Criminal Justice*, *54*(4), 384-396. doi:10.1111/hojo.12138

Alfred, G. C., Hammer, J. H., & Good, G. E. (2014). Male student veterans: Hardiness, psychological well-being, and masculine norms. *Psychology of Men & Masculinity*, *15*(1), 95-99. doi:10.1037/a0031450

Ali, A., & Wolfert, S. (2016). Theatre as a treatment for posttraumatic stress in military veterans: Exploring the psychotherapeutic potential of mimetic induction. *Arts in*

Psychotherapy, *50*, 58-65. doi:10.1016/j.aip.2016.06.004

Alpass, F., Long, N., Chamberlain, K., & MacDonald, C. (1997). Job satisfaction differences between military and ex-military personnel: The role of demographic and organizational variables. *Military Psychology*, *9*(3), 227-249. doi:10.1207/s15327876mp0903_4

Alvinius, A., Johansson, E., & Larsson, G. (2017). Job satisfaction as a form of organizational commitment at the military strategic level. *International Journal of Organizational Analysis*, *25*(2), 312-326. doi:10.1108/ijoa-10-2015-0919

Arnsten, A. F., Raskind, M. A., Taylor, F. B., & Connor, D. F. (2015). The effects of stress exposure on prefrontal cortex: Translating basic research into successful treatments for post-traumatic stress disorder. *Neurobiology of Stress*, *1*, 89-99. doi:10.1016/j.ynstr.2014.10.002

Auer-Rizzi, W., & Reber, G. (2016). How does institution matter? Leadership behaviour in Eastern and Western Europe. In J. Storey, J. Hartley, J. Denis, P. Hart, & D. Ulrich (Eds.), *The Routledge companion to leadership* (pp. 299-309). New York, NY: Routledge. doi:10.4324/9781315739854

Auerswald, D. P. (2016). Legislatures and civil–military relations in the United States and the United Kingdom. *West European Politics*, *40*(1), 42-61. doi:10.1080/01402382.2016.1240404

Baker, C., Basham, V., Bulmer, S., Gray, H., & Hyde, A. (2016). Encounters with the Military. *International Feminist Journal of Politics*, *18*(1), 140-154.

doi:10.1080/14616742.2015.1106102

Balderrama-Durbin, C., Cigrang, J. A., Osborne, L. J., Snyder, D. K., Talcott, G. W., Slep, A. M. S.,…Sonnek, S. (2015). Coming home: A prospective study of family reintegration following deployment to a war zone. *Psychological Services*, *12*(3), 213-221. doi:10.1037/ser0000020

Banneyer, K. N., Koenig, S. A., Wang, L. A., & Stark, K. D. (2017). A review of the effects of parental PTSD: A focus on military children. *Couple and Family Psychology: Research and Practice*, *6*(4), 274-286. doi:10.1037/cfp0000093

Barton, M., Yeatts, P. E., Henson, R. K., & Martin, S. B. (2016). Moving beyond univariate post-hoc testing in exercise science: A primer on descriptive discriminate analysis. *Research Quarterly for Exercise and Sport*, *87*(4), 365-375. doi:10.1080/02701367.2016.1213352

Beardslee, W. R., Klosinski, L. E., Saltzman, W., Mogil, C., Pangelinan, S., McKnight, C. P., & Lester, P. (2013). Dissemination of family-centered prevention for military and veteran families: Adaptations and adoption within community and military systems of care. *Clinical Child and Family Psychology Review*, *16*(4), 394-409. doi:10.1007/s10567-013-0154-y

Bell, K. R., Fann, J. R., Brockway, J. A., Cole, W. R., Bush, N. E.,…Dikmen, S. (2017). Telephone problem solving for service members with mild traumatic brain injury: A randomized, clinical trial. *Journal of Neurotrauma*, *34*(2), 313-321. doi:10.1089/neu.2016.4444

Besterman-Dahan, K., Lind, J. D., & Crocker, T. (2013). "You never heard Jesus say to make sure you take time out for yourself:" Military chaplains and the stigma of mental illness. *Annals of Anthropological Practice*, *37*(2), 108-129 doi:10.1111/napa.12032

Billet, J. , Philippens, M., Fitzgerald, R., & Stoop, I. (2007). Estimation of response bias in the European Social Survey: Using information from reluctant respondents in Round One. *Journal of Official Statistics*, 23(2), 135-162

Binder, A. (1972). A new context for psychology: Social ecology. *American Psychologist*, 27(9), 903–908. doi:10.1037/h0033434

Blackburn, D. (2016). Transitioning from Military to Civilian Life: Examining the Final Step in a Military Career. *Canadian Military Journal*. 16(4). 53-61

Bobrow, J., Cook, E., Knowles, C., & Vieten, C. (2013). Coming all the way home: Integrative community care for those who serve. *Psychological Services*, 10(2), 137–144. doi:10.1037/a0031279

Borah, E., & Fina, B. (2017). Military spouses speak up: A qualitative study of military and Veteran spouses' perspectives. *Journal of Family Social Work*, 20(2), 144–161. doi:10.1080/10522158.2017.1284702

Brancu, M., Thompson, N. L., Beckham, J. C., Green, K. T., Calhoun, P. S., Elbogen, E. B., … Wagner, H. R. (2014). The impact of social support on psychological distress for U.S. Afghanistan/Iraq era veterans with PTSD and other psychiatric diagnoses. *Psychiatry Research*, 217(1-2), 86–92.

doi:10.1016/j.psychres.2014.02.025

Bristol, D. W., & Stur, H. M. (Eds.). (2017). *Integrating the US military: Race, gender, and sexual orientation since World War II*. Baltimore, MD: Johns Hopkins University Press.

Brockway, J. A., St. De Lore, J., Fann, J. R., Hart, T., Hurst, S., Fey-Hinckley, S., … Bell, K. R. (2016). Telephone-delivered problem-solving training after mild traumatic brain injury: Qualitative analysis of service members' perceptions. *Rehabilitation Psychology*, 61(3), 221–230. doi:10.1037/rep0000077

Brownson, C. (2014). Rejecting patriarchy for equivalence in the US Military. *Armed Forces & Society*, 42(1), 235–242. doi:10.1177/0095327x14547807

Bruneau, T. (2015). Challenges in building partner capacity: Civil–military relations in the United States and new democracies. *Small Wars & Insurgencies*, 26(3), 429–445. doi:10.1080/09592318.2014.982880

Cain, M. K., Zhang, Z., & Yuan, K.-H. (2016). Univariate and multivariate skewness and kurtosis for measuring nonnormality: Prevalence, influence and estimation. *Behavior Research Methods*, 49(5), 1716–1735. doi:10.3758/s13428-016-0814-1

Carter, S. P., & Renshaw, K. D. (2016). Spousal communication during military deployments: A review. *Journal of Family Issues*, 37, 2309–2332. doi: 10.1177/0192513X14567956

Chang, Y.-T., Yu, H., & Lu, H.-P. (2015). Persuasive messages, popularity cohesion, and message diffusion in social media marketing. *Journal of Business Research*,

68(4), 777–782. doi:10.1016/j.jbusres.2014.11.027

Chesbrough, K. B., Ryan, M. A. K., Amoroso, P., Boyko, E. J., Gackstetter, G. D., … Hooper, T. I. (2002). The Millennium Cohort Study: A 21-year prospective cohort Study of 140,000 military personnel. *Military Medicine*, 167(6), 483–488. doi:10.1093/milmed/167.6.483

Cheung, J. H., Britt, T. W., Raymond, M. A., Zinzow, H. M., & Pury, C. L. S. (2016). Soldier recommendations for improving mental health treatment seeking in the military. *Military Behavioral Health*, 4(2), 100–107. doi:10.1080/21635781.2016.1153540

Cheung, J. H., Burns, D. K., Sinclair, R. R., & Sliter, M. (2016). Amazon Mechanical Turk in Organizational Psychology: An evaluation and practical recommendations. *Journal of Business and Psychology*, 32(4), 347–361. doi:10.1007/s10869-016-9458-5

Cifu, D. X., Taylor, B. C., Carne, W. F., Bidelspach, D., Sayer, N. A., Scholten, J., & Campbell, E. H. (2013). Traumatic brain injury, posttraumatic stress disorder, and pain diagnoses in OIF/OEF/OND Veterans. *Journal of Rehabilitation Research and Development*, 50(9), 1169–1176. doi:10.1682/jrrd.2013.01.0006

Clement, S., Schauman, O., Graham, T., Maggioni, F., Evans-Lacko, S., Bezborodovs, N., … Thornicroft, G. (2014). What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. *Psychological Medicine*, 45(01), 11–27. doi:10.1017/s0033291714000129

Cohen, J. (1988). *Statistical power analysis for the behavioral sciences*. Hillsdale, New Jersey: Lawrence Erlbaum Associates.

Cohn, L.P. (2015). How much is enough? *Strategic Studies Quarterly*, 9(3), 3-12. doi: 10.21236/ada625798

Coleman, S. J., Stevelink, S. A. M., Hatch, S. L., Denny, J. A., & Greenberg, N. (2017). Stigma-related barriers and facilitators to help seeking for mental health issues in the armed forces: a systematic review and thematic synthesis of qualitative literature. *Psychological Medicine*, 47(11), 1880–1892. doi:10.1017/s0033291717000356

Collins, E., Wilmoth, M., and Schwartz, L. (2013). Have you ever served in the military? Campaign in partnership with the Joining Forces Initiative. *Nursing Outlook,* 61, 375–376 doi: 10.1016/j.outlook.2013.07.004

Coon, C. T. (2016). Social capital and the returning military veteran. *Social Capital and Community Well-Being*, 33–52. doi:10.1007/978-3-319-33264-2_3

Cooper, L., Caddick, N., Godier, L., Cooper, A., & Fossey, M. (2016). Transition from the military into civilian life. *Armed Forces & Society*, 44(1), 156–177. doi:10.1177/0095327x16675965

Cor, M. K. (2016). Trust me, it is valid: Research validity in pharmacy education research. *Currents in Pharmacy Teaching and Learning*, 8(3), 391–400. doi:10.1016/j.cptl.2016.02.014

Cornish, M. A., Thys, A., Vogel, D. L., & Wade, N. G. (2014). Post-deployment

difficulties and help seeking barriers among military veterans: Insights and intervention strategies. *Professional Psychology: Research and Practice*, 45(6), 405–409. doi:10.1037/a0037986

Cox, J., & Albright, D. L. (2014). The road to recovery: Addressing the challenges and resilience of military couples in the scope of veteran's mental health. *Social Work in Mental Health*, 12(5-6), 560–574. doi:10.1080/15332985.2014.891553

Creech, S. K., Hadley, W., & Borsari, B. (2014). The impact of military deployment and reintegration on children and parenting: A systematic review. *Professional Psychology: Research and Practice*, 45, 452–464. doi:10.1037/a0035055

Crum-Cianflone, N. (2013). The Millennium Cohort Study: Answering long-term health concerns of U.S. military service members by integrating longitudinal survey data with military health system records. In J.Amara & A. Hendricks (Eds.), *Military health care: From predeployment to postseparation* (pp. 55–77). New York, NY: Routledge

Crum-Cianflone, N. F., & Jacobson, I. (2013). Gender differences of postdeployment post-traumatic stress disorder among service members and veterans of the Iraq and Afghanistan conflicts. *Epidemiologic Reviews*, 36(1), 5–18. doi:10.1093/epirev/mxt005

Crum-Cianflone, N. F., Bagnell, M. E., Schaller, E., Boyko, E. J., Smith, B., Maynard, C., … Smith, T. C. (2014). Impact of combat deployment and posttraumatic stress disorder on newly reported coronary heart disease among US active duty and

reserve forces. *Circulation*, 129(18), 1813–1820. doi:10.1161/circulationaha.113.005407

Currier, J. M., Holland, J. M., Drescher, K., & Foy, D. (2015). Initial psychometric evaluation of the Moral Injury Questionnaire—Military version. *Clinical Psychology & Psychotherapy*, 22,54–63. doi:10.1002/cpp.1866

Danish, S. J., & Antonides, B. J. (2013). The challenges of reintegration for service members and their families. *American Journal of Orthopsychiatry*, 83(4), 550–558. doi:10.1111/ajop.12054

Davidson, J. (2013). The contemporary presidency: Civil-military friction and presidential decision making: explaining the broken dialogue. *Presidential Studies Quarterly*, 43(1), 129–145. doi:10.1111/psq.12006

DeBeer, B. B., Kimbrel, N. A., Meyer, E. C., Gulliver, S. B., & Morissette, S. B. (2014). Combined PTSD and depressive symptoms interact with post-deployment social support to predict suicidal ideation in Operation Enduring Freedom and Operation Iraqi Freedom veterans. *Psychiatry research*, *216*(3), 357-362. doi:10.1016/j.psychres.2014.02.010

Dekel, R., Levinstein, Y., Siegel, A., Fridkin, S., & Svetlitzky, V. (2016). Secondary traumatization of partners of war veterans: The role of boundary ambiguity. *Journal of Family Psychology*, 30(1), 63–71. doi:10.1037/fam0000163

Demers, A. L. (2013). From death to life. *Journal of Humanistic Psychology*, 53(4), 489–515. doi:10.1177/0022167812472395

Department of Veterans Affairs. (2017). Department of Veterans Affairs statistics at a glance. Retrieved from: https://www.va.gov/vetdata/.

DeViva, J. C., Sheerin, C. M., Southwick, S. M., Roy, A. M., Pietrzak, R. H., & Harpaz Rotem, I. (2016). Correlates of VA mental health treatment utilization among OEF/OIF/OND veterans: Resilience, stigma, social support, personality, and beliefs about treatment. *Psychological trauma: theory, research, practice, and policy*, 8(3), 310-318. doi:10.1037/tra0000075

Diller, E. C. (2001). *Citizens in service: The challenge of delivering civic engagement training to national service programs*. Washington, DC: Corporation for National and Community Service.

Doherty, M. E., & Scannell-Desch, E. (2015). After the parade: Military nurses' reintegration experiences from the Iraq and Afghanistan Wars. *Journal of Psychosocial Nursing and Mental Health Services*, 53(5), 28–35. doi:10.3928/02793695-20150406-01

Dostál, J. (2015). Theory of Problem Solving. *Procedia - Social and Behavioral Sciences*, 174, 2798–2805. doi:10.1016/j.sbspro.2015.01.970

Doyle, J. M. and Streeter, R. A. (2016), Veterans' location in health professional shortage areas: Implications for access to care and workforce supply. *Health Service Research*, 52, 459-480. doi:10.1111/1475-6773.12633

Elbogen, E. B., Sullivan, C. P., Wolfe, J., Wagner, H. R., & Beckham, J. C. (2013). Homelessness and money mismanagement in Iraq and Afghanistan Veterans.

American Journal of Public Health, 103(S2), S248–S254. doi:10.2105/ajph.2013.301335

Elbogen, E. B., Wagner, H. R., Johnson, S. C., Kinneer, P., Kang, H., Vasterling, J. J., … Beckham, J. C. (2013a). Are Iraq and Afghanistan veterans using mental health services? New data from a national random-sample survey. *Psychiatric Services*, 64(2), 134–141. doi:10.1176/appi.ps.004792011

Eldridge, S. M., Lancaster, G. A., Campbell, M. J., Thabane, L., Hopewell, S., Coleman, C. L., & Bond, C. M. (2016). Defining feasibility and pilot studies in preparation for randomised controlled trials: Development of a conceptual framework. *PloS One*, 11(3), e0150205. doi:10.1371/journal.pone.0150205

Elin, L. (2013). The radicalization of Zeke Spier: How the Internet contributes to civic engagement and new forms of social capital. In M. McCaughey & M. D. Ayers (Eds.), *Cyberactivism: Online activism in theory and practice* (pp. 107-124). New York, NY: Routledge.

Ellis, T., & Levy, Y. (2009). Towards a guide for novice researchers on research methodology: Review and proposed methods. *Issues in Informing Science and Information Technology*, 6, 323–337. doi:10.28945/1062

Elnitsky, C.A., Andresen, E.M., Clark, M. E., McGarity, S., Hall, C.G., & Kerns, R.D. (2013). Access to the US Department of Veterans Affairs health system: self-reported barriers to care among returnees of Operations Enduring Freedom and Iraqi Freedom. *BMC health services research*, 13(1), 498. doi:10.1186/1472-

6963-13-498

Elnitsky, C. A., Blevins, C. L., Fisher, M. P., & Magruder, K. (2017). Military service member and veteran reintegration: A critical review and adapted ecological model. *American Journal of Orthopsychiatry*, 87(2), 114–128. doi:10.1037/ort0000244

Escolas, S. M., Pitts, B. L., Safer, M. A., & Bartone, P. T. (2013). The protective value of hardiness on military posttraumatic stress symptoms. *Military Psychology*, 25(2), 116–123. doi:10.1037/h0094953

ESS Round 1: European Social Survey (2018): ESS-1 2002 Documentation Report. Edition 6.6. Bergen, European Social Survey Data Archive, NSD - Norwegian Centre for Research Data for ESS ERIC.

Faul, F., Erdfelder, E., Lang, A.-G., & Buchner, A. (2007). G*Power 3: A flexible statistical power analysis program for the social, behavioral, and biomedical sciences. *Behavior Research Methods*, 39(2), 175–191. doi:10.3758/bf03193146

Feaver, P. D., & Gelpi, C. (2011). *Choosing Your Battles: American civil-military relations and the use of force*. Princeton, NJ: Princeton University Press.

Fforde, A. (2016). Confirmation bias: methodological causes and a palliative response. *Quality & Quantity*, 51(5), 2319–2335. doi:10.1007/s11135-016-0389-z

Field, A. (2013). *Discovering statistics using IBM SPSS statistics*. SAGE Publishing, Inc.

Fischer, E. P., Sherman, M. D., McSweeney, J. C., Pyne, J. M., Owen, R. R., & Dixon, L. B. (2015). Perspectives of family and veterans on family programs to support

reintegration of returning veterans with posttraumatic stress disorder. *Psychological Services*, 12(3), 187–198. doi:10.1037/ser0000033

Fischer, M. J., Lundquist, J. H., & Vachon, T. E. (2016). Residential segregation: The mitigating effects of past military experience. *Social Science Research*, 60, 61–73. doi:10.1016/j.ssresearch.2016.07.003

Fisher, M. P. (2014). PTSD in the U.S. military, and the politics of prevalence. *Social Science & Medicine*, 115, 1–9. doi:10.1016/j.socscimed.2014.05.051

Fordham, B. O. (2016). Historical perspective on public support for the draft: War costs and military service. *Journal of Global Security Studies*, 1(4), 303–322. doi:10.1093/jogss/ogw014

Freytes, I. M., LeLaurin, J. H., Zickmund, S. L., Resende, R. D., & Uphold, C. R. (2017). Exploring the post-deployment reintegration experiences of veterans with PTSD and their significant others. *American Journal of Orthopsychiatry*, 87(2), 149–156. doi:10.1037/ort0000211

Friedl, K. E., Knapik, J. J., Häkkinen, K., Baumgartner, N., Groeller, H., Taylor, N. A. S., … Nindl, B. C. (2015). Perspectives on aerobic and strength influences on military physical readiness. *Journal of Strength and Conditioning Research*, 29, S10–S23. doi:10.1519/jsc.0000000000001025

Friedman, B. H., & Logan, J. (2012). Why the U.S. military budget is "foolish and unsustainable." *Orbis*, 56(2), 177–191. doi:10.1016/j.orbis.2012.01.003

Friesen, M. C. (2014). framing symbols and space: counterrecruitment and resistance to

the u.s. military in public education. *Sociological Forum*, 29(1), 75–97. doi:10.1111/socf.12070

Fulmer, C. A., & Ostroff, C. (2017). Trust in direct leaders and top leaders: A trickle-up model. *Journal of Applied Psychology*, 102(4), 648–657. doi:10.1037/apl0000189

Garcia, R. J. B. (2014). National Service and Civic Engagement: A Natural Experiment. *Political Behavior*, 37(4), 845–864. doi:10.1007/s11109-014-9293-1

Gatignon, H. (2013). Testing mediation and moderation effects. *Statistical Analysis of Management Data*, 349–452. doi:10.1007/978-1-4614-8594-0_11

Gil-Rivas, V., Kilmer, R. P., Larson, J. C., & Armstrong, L. M. (2017). Facilitating successful reintegration: Attending to the needs of military families. *American Journal of Orthopsychiatry*, 87(2), 176–184. doi:10.1037/ort0000201

Glenn, D. E., Acheson, D. T., Geyer, M. A., Nievergelt, C. M., Baker, D. G., & Risbrough, V. B. (2016). High and low threshold for startle threshold for startle reactivity associated with PTSD symptoms but not PTSD risk: Evidence from a prospective study of active duty marines. *Depression and Anxiety*, 33(3), 192–202. doi:10.1002/da.22475

Glynn, S. M. (2013). Family-centered care to promote successful community reintegration after war: It takes a nation. *Clinical Child and Family Psychology Review*, 16(4), 410–414. doi:10.1007/s10567-013-0153-z

Godier, L. R., Caddick, N., Kiernan, M. D., & Fossey, M. (2017). Transition support for vulnerable service leavers in the U.K.: Providing care for early service leavers.

Military Behavioral Health, 6(1), 13–21. doi:10.1080/21635781.2017.1325804

Griffith, R. K., Jr., (1985). About face? The U.S. Army and the draft. *Armed Forces & Society*, 12(1), 108–133. doi:10.1177/0095327x8501200106

Hajjar, R. M. (2013). Emergent postmodern US Military culture. *Armed Forces & Society*, 40(1), 118–145. doi:10.1177/0095327x12465261

Hamilton, J. A., Coleman, J. A., & Davis, W. J. (2016). Leadership perspectives of stigma-related barriers to mental health care in the military. *Military Behavioral Health*, 5(1), 81–90. doi:10.1080/21635781.2016.1257964

Hannon, P. A., Helfrich, C. D., Chan, K. G., Allen, C. L., Hammerback, K., Kohn, M. J., ... & Harris, J. R. (2017). Development and pilot test of the workplace readiness questionnaire, a theory-based instrument to measure small workplaces' readiness to implement wellness programs. *American Journal of Health Promotion*, *31*(1), 67-75. doi:10.4278/ajhp.141204-quan-604

Hargittai, E., & Shaw, A. (2013). Digitally savvy citizenship: The role of internet skills and engagement in young adults' political participation around the 2008 presidential election. *Journal of Broadcasting & Electronic Media*, 57(2), 115-134. doi: 10.1080/08838151.2013.787079

Harrison, E., Quick, A., and Abdallah, S. (eds.) (2016). *Looking through the wellbeing kaleidoscope.* London: New Economics Foundation.

Hauser, W. L. (2017). Why America should restore the draft. *Armed Forces & Society*, 44(1), 181–185. doi:10.1177/0095327x17695226

Hawkins, B. L., McGuire, F. A., Linder, S. M., & Britt, T. W. (2015). Understanding contextual influences of community reintegration among injured servicemembers. *Journal of Rehabilitation Research and Development*, 52(5), 527–542. doi:10.1682/jrrd.2014.08.019

Hines, L. A., Gribble, R., Wessely, S., Dandeker, C., & Fear, N. T. (2014). Are the Armed Forces understood and supported by the public? A view from the United Kingdom. *Armed Forces & Society*, 41(4), 688–713. doi:10.1177/0095327x14559975

Hodges, E. B. (2016). Does U.S. Marine Corps recruit training constitute a type of civic education? *Journal of Political Science Education*, 13(1), 91–108. doi:10.1080/15512169.2016.1206827

Hoglund, M. W., & Schwartz, R. M. (2014). Mental health in deployed and nondeployed veteran men and women in comparison with their civilian counterparts. *Military Medicine*, 179(1), 19–25. doi:10.7205/milmed-d-13-00235

Holt, M., Reed, M., Woodruff, S. I., DeMers, G., Matteucci, M., & Hurtado, S. L. (2017). Adaptation of screening, brief intervention, referral to treatment to active duty military personnel in an emergency department: Findings from a formative research study. *Military Medicine*, 182(7), e1801–e1807. doi:10.7205/milmed-d-16-00333

Horton, J. L., Jacobson, I. G., Wong, C. A., Wells, T. S., Boyko, E. J., … Smith, B. (2013). The impact of prior deployment experience on civilian employment after

military service. *Occupational and Environmental Medicine*, 70(6), 408–417. doi:10.1136/oemed-2012-101073

Ioannidis, J. P. A., Greenland, S., Hlatky, M. A., Khoury, M. J., Macleod, M. R., Moher, D., … Tibshirani, R. (2014). Increasing value and reducing waste in research design, conduct, and analysis. The Lancet, 383(9912), 166–175. doi:10.1016/s0140-6736(13)62227-8

Institute of Medicine. (2014). Preventing psychological disorders in service members and their families: An assessment of programs. Retrieved from http://www.iom.edu/Reports/2014/Preventing-Psychological-Disorders-in-Service-Members-and-Their-Families.aspx.

Institute of Medicine. 2013. Returning home from Iraq and Afghanistan: Assessment of readjustment needs of veterans, service members, and their families. Washington, DC: The National Academies Press. doi:10.17226/13499

Interian, A., Kline, A., Janal, M., Glynn, S., & Losonczy, M. (2014). Multiple deployments and combat trauma: Do homefront stressors increase the risk for posttraumatic stress symptoms? *Journal of Traumatic Stress*, 27(1), 90–97. doi:10.1002/jts.21885

Jenkinson, C. E., Dickens, A. P., Jones, K., Thompson-Coon, J., Taylor, R. S., Rogers, M., … Richards, S. H. (2013). Is volunteering a public health intervention? A systematic review and meta-analysis of the health and survival of volunteers. *BMC Public Health*, 13(1). doi:10.1186/1471-2458-13-773

Johnson, T., Dawes, C. T., McGue, M., & Iacono, W. G. (2017). Numbers assigned in the Vietnam-era selective service lotteries influence the military service decisions of children born to draft-eligible men. *Armed Forces & Society*, 44(2), 347–367. doi:10.1177/0095327x17707197

Joshi, A., Kale, S., Chandel, S., & Pal, D. (2015). Likert scale: Explored and explained. *British Journal of Applied Science & Technology*, 7(4), 396–403. doi:10.9734/bjast/2015/14975

Jowell, R., Roberts, C., Fitzgerald, R., & Eva, G. (Eds.). (2007). *Measuring attitudes cross-nationally: Lessons from the European Social Survey*. Sage. doi:10.4135/9781849209458

Kasckow, J., Klaus, J., Morse, J., Oslin, D., Luther, J., Fox, L., … Haas, G. L. (2014). Using problem solving therapy to treat veterans with subsyndromal depression: a pilot study. *International Journal of Geriatric Psychiatry*, 29(12), 1255–1261. doi:10.1002/gps.4105

Kaufmann, L. J., "Buck" Richardson, W. J., Floyd, J., & Shore, J. (2014). Tribal Veterans Representative (TVR) training program: the effect of community outreach workers on American Indian and Alaska Native veterans' access to and utilization of the Veterans Health Administration. *Journal of Community Health*, 39(5), 990–996. doi:10.1007/s10900-014-9846-6

Kern, E. (2017). Systemic barriers faced by women attempting to leave abusive military marriages. *Journal of Counseling & Development*, 95(3), 354–364.

doi:10.1002/jcad.12149

Khatri, C., Chapman, S. J., Glasbey, J., Kelly, M., Nepogodiev, D., … Bhangu, A. (2015). Social media and internet driven study recruitment: Evaluating a new model for promoting collaborator engagement and participation. *PLOS ONE*, 10(3), e0118899. doi:10.1371/journal.pone.0118899

Kirchner, A. T., Ladd, D. A., Elshaw, J. J., & Schlub, J. F. (2013). An inexpensive workplace initiative to motivate high-risk individual health improvement. *Military Medicine*, 178(8), e948–e953. doi:10.7205/milmed-d-13-00065

Klein, G., Klein, H. A., Lande, B., Borders, J., & Whitacre, J. C. (2015). Police and military as good strangers. *Journal of Occupational and Organizational Psychology*, 88(2), 231–250. doi:10.1111/joop.12110

Klingler, J. D., & Chatagnier, J. T. (2013). Are you doing your part? *Armed Forces & Society*, 40(4), 673–695. doi:10.1177/0095327x12471932

Körner, M., Wirtz, M. A., Bengel, J., & Göritz, A. S. (2015). Relationship of organizational culture, teamwork and job satisfaction in interprofessional teams. *BMC Health Services Research*, 15(1). doi:10.1186/s12913-015-0888-y

Kovner, C., Brewer, C., Wu, Y. W., Cheng, Y., & Suzuki, M. (2006). Factors associated with work satisfaction of registered nurses. *Journal of Nursing Scholarship*, *38*(1), 71–79. doi: 10.1111/j.1547-5069.2006.00080.x

Krasny, M. E., Pace, K. H., Tidball, K. G., & Helphand, K. (2014). Nature engagement to foster resilience in military communities. In *Greening in the Red Zone: Disaster,*

Resilience and Community Greening (pp. 163-180). Dordrecht, Netherlands: Springer.

Kritikos, T. K., Comer, J. S., He, M., Curren, L. C., & Tompson, M. C. (2018). Combat experience and posttraumatic stress symptoms among military-serving parents: A meta-analytic examination of associated offspring and family outcomes. *Journal of Abnormal Child Psychology*. doi:10.1007/s10802-018-0427-5

Kukla, M., Bonfils, K. A., & Salyers, M. P. (2015). Factors impacting work success in Veterans with mental health disorders: A Veteran-focused mixed methods pilot study. *Journal of Vocational Rehabilitation*, 43(1), 51–66. doi:10.3233/jvr-150754

LaMotte, A. D., Taft, C. T., Weatherill, R. P., Scott, J. P., & Eckhardt, C. I. (2014). Examining intimate partner aggression assessment among returning veterans and their partners. *Psychological Assessment*, 26(1), 8–15. doi:10.1037/a0034579

Lawrence, K. A., & Matthieu, M. M. (2017). Perceived family impact of volunteering among reintegrating post-9/11 Veterans. *Journal of Family Social Work*, 1–23. doi:10.1080/10522158.2017.1408513

LeardMann, C. A., Pietrucha, A., Magruder, K. M., Smith, B., Murdoch, M., Jacobson, I. G., … Smith, T. C. (2013). Combat deployment is associated with sexual harassment or sexual assault in a large, female military cohort. *Women's Health Issues*, 23(4), e215–e223. doi:10.1016/j.whi.2013.05.002

Lester, P., Aralis, H., Sinclair, M., Kiff, C., Lee, K., Mustillo, S., & ... Wadsworth, S. M.

(2016). The impact of deployment on parental, family and child adjustment in military families. *Child Psychiatry & Human Development*, 47(6), 938. doi:10.1007/s10578-016-0624-9

Leung, S.-O. (2011). A comparison of psychometric properties and normality in 4-, 5-, 6-, and 11-point Likert scales. *Journal of Social Service Research*, 37(4), 412–421. doi:10.1080/01488376.2011.580697

Levin-Waldman, O. M. (2013). Income, civic participation and achieving greater democracy. *The Journal of Socio-Economics*, 43, 83–92. doi:10.1016/j.socec.2013.01.004

Libin, A. V., Schladen, M. M., Danford, E., Cichon, S., Bruner, D., Scholten, J., … Magruder, K. M. (2017). Perspectives of veterans with mild traumatic brain injury on community reintegration: Making sense of unplanned separation from service. *American Journal of Orthopsychiatry*, 87(2), 129–138. doi:10.1037/ort0000253

Liebert, H., & Golby, J. (2017). National service and the all-volunteer force. *Armed Forces & Society*, 44(1), 186–192. doi:10.1177/0095327x17715245

Lin, N. (2017). Building a network theory of social capital. In N. Lin, K. S. Cook, & R. S. Burt (Eds.), *Social capital: Theory and research* (pp. 3-28). New York, NY: Routledge.

Lins, K. V., Servaes, H., & Tamayo, A. M. (2016). Social capital, trust, and firm performance: The value of corporate social responsibility during the financial crisis. *SSRN Electronic Journal*. doi:10.2139/ssrn.2555863

Lippa, S. M., Fonda, J. R., Fortier, C. B., Amick, M. A., Kenna, A., Milberg, W. P., & McGlinchey, R. E. (2015). Deployment-related psychiatric and behavioral conditions and their association with functional disability in OEF/OIF/OND veterans. *Journal of Traumatic Stress*, 28(1), 25–33. doi:10.1002/jts.21979

Lopes, S., Chambel, M. J., Castanheira, F., & Oliveira-Cruz, F. (2015). Measuring job satisfaction in Portuguese military sergeants and officers: Validation of the job descriptive index and the job in general scale. *Military Psychology*, 27(1), 52–63. doi:10.1037/mil0000060

Lytell, M. C., Kuhn, K., Haddad, A., Marquis, J. P., Lim, N., Hall, K. C., Stewart, R. &Wenger, J.W. (2015). Force drawdowns and demographic diversity: Investigating the impact of force reductions on the demographic diversity of the US military. *RAND National Defense Research Institute.* Retrieved from: http://www.dtic.mil.

MacDermid Wadsworth, S., Bailey, K. M., & Coppola, E. C. (2016). U.S. military children and the wartime deployments of family members. *Child Development Perspectives*, 11(1), 23–28. doi:10.1111/cdep.12210

MacGregor, A. J., Heltemes, K. J., Clouser, M. C., Han, P. P., & Galarneau, M. R. (2014). Dwell time and psychological screening outcomes among military service members with multiple combat deployments. *Military Medicine,* 179(4), 381–387. doi:10.7205/milmed-d-13-00314

Mankowski, M., Haskell, S. G., Brandt, C., & Mattocks, K. M. (2015). Social support

throughout the deployment cycle for women veterans returning from Iraq and Afghanistan. *Social Work in Health Care*, 54(4), 287–306. doi:10.1080/00981389.2014.990130

Martindale-Adams, J., Nichols, L. O., Zuber, J., Graney, M., & Burns, R. (2016). Decision-making during the deployment cycle. *The Family Journal*, 24(3), 216–221. doi:10.1177/1066480716648686

Matthieu, M. M., Lawrence, K. A., & Robertson-Blackmore, E. (2017). The impact of a civic service program on biopsychosocial outcomes of post 9/11 U.S. military veterans. *Psychiatry Research*, 248, 111–116. doi:10.1016/j.psychres.2016.12.028

McAllum, K. (2014). Meanings of organizational volunteering. *Management Communication Quarterly,* 28(1), 84–110. doi:10.1177/0893318913517237

McAloney, K., Stringer, M., & Mallett, J. (2013). The measurement of mistrust among religious group members in Northern Ireland. *Journal of Applied Social Psychology*, 43, E329–E338. doi:10.1111/jasp.12029

McAndrew, L. M., D'Andrea, E., Lu, S.-E., Abbi, B., Yan, G. W., Engel, C., & Quigley, K. S. (2013). What pre-deployment and early post-deployment factors predict health function after combat deployment? A prospective longitudinal study of Operation Enduring Freedom (OEF)/Operation Iraqi Freedom (OIF) soldiers. *Health and Quality of Life Outcomes*, 11(1), 73. doi:10.1186/1477-7525-11-73

McGinnis, M. D., & Ostrom, E. (2014). Social-ecological system framework: Initial changes and continuing challenges. *Ecology and Society*, 19(2). doi:10.5751/es-

06387-190230

McMains, K. C., Rodriguez, R. G., Peel, J., Yun, H. C., True, M. W., & Jones, W. S. (2018). Assessing mentorship experiences of faculty at a military academic center: Challenge and opportunity. *Southern Medical Journal*, 111(5), 262–267. doi:10.14423/smj.0000000000000799

McNally, R. J., & Frueh, B. C. (2013). Why are Iraq and Afghanistan War veterans seeking PTSD disability compensation at unprecedented rates? *Journal of Anxiety Disorders*, 27(5), 520–526. doi:10.1016/j.janxdis.2013.07.002

Meyer, E. (2013). Case report: Military subcultural competency. *Military Medicine*, 178(7), e848–e850. doi:10.7205/milmed-d-13-00027

Meyer, E. G., Writer, B. W., & Brim, W. (2016). The importance of military cultural competence. *Current Psychiatry Reports*, 18(3). doi:10.1007/s11920-016-0662-9

Meyers, L. S., Gamst, G., & Guarino, A. J. (2017). *Applied multivariate research: Design and interpretation*. Thousand Oaks, CA: SAGE Publications, Inc.

Migliore, L. A., & Pound, L. B. (2016). The Military Identity Project: A mixed method investigation of military self-schema content. *Military Behavioral Health*, 4(2), 183–192. doi:10.1080/21635781.2015.1133351

Miller, K. E., Finn, J. A., & Newman, E. (2014). Are communities ready? Assessing providers' practices, attitudes, and knowledge about military personnel. *Professional Psychology: Research and Practice*, 45(6), 398–404. doi:10.1037/a0036774

Miller, K., Fitzgerald, R., Padilla, J.-L., Willson, S., Widdop, S., Caspar, R., … Schoua-Glusberg, A. (2011). Design and analysis of cognitive interviews for comparative multinational testing. *Field Methods*, 23(4), 379–396. doi:10.1177/1525822x11414802

Miller, S. M., Pedersen, E. R., & Marshall, G. N. (2017). Combat experience and problem drinking in veterans: Exploring the roles of PTSD, coping motives, and perceived stigma. *Addictive Behaviors*, 66, 90-95. doi:10.1016/j.addbeh.2016.11.011

Mittal, D., Drummond, K. L., Blevins, D., Curran, G., Corrigan, P., & Sullivan, G. (2013). Stigma associated with PTSD: Perceptions of treatment seeking combat veterans. *Psychiatric Rehabilitation Journal*, 36(2), 86–92. doi:10.1037/h0094976

Murphy, R. A., & Fairbank, J. A. (2013). Implementation and dissemination of military informed and evidence-based interventions for community dwelling military families. *Clinical Child and Family Psychology Review*, 16(4), 348–364. doi:10.1007/s10567-013-0149-8

Nash, W. P., & Litz, B. T. (2013). Moral injury: A mechanism for war-related psychological trauma in military family members. *Clinical Child and Family Psychology Review*, 16(4), 365–375. doi:10.1007/s10567-013-0146-y

National Conference on Citizenship. (2016). 2016 Veterans Civic Health Index. Retrieved from: https://ncoc.org/.

National Conference on Citizenship. (2017). Civic deserts: America's civic health

challenge. Retrieved from: https://ncoc.org/.

Negrusa, B., & Negrusa, S. (2014). Home front: Post-deployment mental health and divorces. Demography, 51(3), 895–916. doi:10.1007/s13524-014-0294-9

Nezu, A. M., Nezu, C. M., Stern, J. B., Greenfield, A. P., Diaz, C., & Hays, A. M. (2017). Social problem solving moderates emotion reactivity in predicting suicide ideation among U.S. veterans. *Military Behavioral Health*, 5(4), 417–426. doi:10.1080/21635781.2017.1337595

Nteta, T. M., & Tarsi, M. R. (2015). Self-selection versus socialization revisited. *Armed Forces & Society*, 42(2), 362–385. doi:10.1177/0095327x15580115

Obeid, S., Gitelman, V., & Baron-Epel, O. (2014). The relationship between social capital and traffic law violations: Israeli Arabs as a case study. *Accident Analysis & Prevention*, 71, 273–285. doi:10.1016/j.aap.2014.05.027

O'Donnell, L., Karlin, B., Landon, M. K., Dash, K., & Reed, G. (2018). Soldiers' recognition and response to mental health problems: Using vignettes to elicit attitudes and barriers to help seeking. *Military Behavioral Health*, 6(1), 82-92. doi: 10.1080/21635781.2017.1355282

Osborne, N. J. (2013). Veteran ally: Practical strategies for closing the military-civilian gap on campus. *Innovative Higher Education*, 39(3), 247–260. doi:10.1007/s10755-013-9274-z

Österberg, J., & Rydstedt, L. (2018). Job satisfaction among Swedish soldiers: Applying the job characteristics model to newly recruited military personnel. *Military*

Psychology, 30(4), 302–310. doi:10.1080/08995605.2018.1425585

Ostrom, E. (2007). A diagnostic approach for going beyond panaceas. *Proceedings of the National Academy of Sciences*, 104(39), 15181–15187. doi:10.1073/pnas.0702288104

Ostrom, E. (2009). A general framework for analyzing sustainability of social-ecological systems. *Science*, 325(5939), 419–422. doi:10.1126/science.1172133

Oztok, M., Zingaro, D., Makos, A., Brett, C., & Hewitt, J. (2015). Capitalizing on social presence: The relationship between social capital and social presence. *The Internet and Higher Education*, 26, 19–24. doi:10.1016/j.iheduc.2015.04.002

Parco, J. E., & Levy, D. A. (2013). Policy and paradox: Grounded theory at the moment of DADT repeal. *Journal of Homosexuality*, 60(2-3), 356–380. doi:10.1080/00918369.2013.744925

Patulny, R., Siminski, P., & Mendolia, S. (2015). The front line of social capital creation: A natural experiment in symbolic interaction. *Social Science & Medicine*, 125, 8–18. doi:10.1016/j.socscimed.2014.04.026

Pecáková, I. (2016). Pitfalls of Quantitative Surveys Online. Acta Oeconomica Pragensia, 2016(6), 3–15. doi:10.18267/j.aop.560

Peng, J., Li, D., Zhang, Z., Tian, Y., Miao, D., Xiao, W., & Zhang, J. (2014). How can core self-evaluations influence job burnout? The key roles of organizational commitment and job satisfaction. *Journal of Health Psychology*, 21(1), 50–59. doi:10.1177/1359105314521478

Petty, R. E. (2016). *Attitudes and persuasion: Classic and contemporary approaches*. Boulder, CO: Taylor and Francis.

Phillips, A. W., Reddy, S., & Durning, S. J. (2015). Improving response rates and evaluating nonresponse bias in surveys: AMEE Guide No. 102. *Medical Teacher*, 38(3), 217–228. doi:10.3109/0142159x.2015.1105945

Plumb, T. R., Peachey, J. T., & Zelman, D. C. (2014). Sleep disturbance is common among servicemembers and veterans of Operations Enduring Freedom and Iraqi Freedom. *Psychological Services*, 11(2), 209–219. doi:10.1037/a0034958

Price, J. L. (1997). Handbook of organizational measurement. *International Journal of Manpower*, 18(4/5/6), 305–558. doi:10.1108/01437729710182260

Pugh, M. J. V., Finley, E. P., Copeland, L. A., Wang, C.-P., Noel, P. H., Amuan, M. E., … Pugh, J. A. (2014). Complex Comorbidity Clusters in OEF/OIF Veterans. *Medical Care*, 52(2), 172–181. doi:10.1097/mlr.0000000000000059

Pugh, M. J., Swan, A. A., Carlson, K. F., Jaramillo, C. A., Eapen, B. C., Dillahunt-Aspillaga, C., … Grafman, J. H. (2018). Traumatic brain injury severity, comorbidity, social support, family functioning, and community reintegration among veterans of the Afghanistan and Iraq Wars. *Archives of Physical Medicine and Rehabilitation*, 99(2), S40–S49. doi:10.1016/j.apmr.2017.05.021

Quinn, R. P., & Mangione, T. W. (1973). Evaluating weighted models of measuring job satisfaction: A Cinderella story. *Organizational Behavior and Human Performance*, 10(1), 1–23. doi:10.1016/0030-5073(73)90002-0

Ramchand, R., Rudavsky, R., Grant, S., Tanielian, T., & Jaycox, L. (2015). Prevalence of, risk factors for, and consequences of posttraumatic stress disorder and other mental health problems in military populations deployed to Iraq and Afghanistan. *Current Psychiatry Reports*, 17(5). doi:10.1007/s11920-015-0575-z

Ramsey, S. R., Thompson, K. L., McKenzie, M., & Rosenbaum, A. (2016). Psychological research in the internet age: The quality of web-based data. *Computers in Human Behavior*, 58, 354–360. doi:10.1016/j.chb.2015.12.049

Rattray, N. A., True, G., Natividad, D. M., Salyers, M. P., Frankel, R. M., & Kukla, M. (2019). The long and winding road to postsecondary education for U.S. veterans with invisible injuries. *Psychiatric Rehabilitation Journal.* doi:10.1037/prj0000375

Ray-Mukherjee, J., Nimon, K., Mukherjee, S., Morris, D. W., Slotow, R., & Hamer, M. (2014). Using commonality analysis in multiple regressions: a tool to decompose regression effects in the face of multicollinearity. *Methods in Ecology and Evolution*, 5(4), 320–328. doi:10.1111/2041-210x.12166

Reedy, A. R., & Kobayashi, R. (2015). National Guard service members' perceptions of informal and formal supports: An exploratory study. *Journal of Social Work in Disability & Rehabilitation*, 14(2), 110–123. doi:10.1080/1536710x.2015.1014534

Reis, T. N. (2015). A policy analysis framework for green political economy. *International Journal of Green Economics*, 9(3/4), 330.

doi:10.1504/ijge.2015.075197

Resnik, L., Bradford, D. W., Glynn, S. M., Jette, A. M., Hernandez, C. J., & Wills, S. (2012). Issues in defining and measuring veteran community reintegration: Proceedings of the Working Group on Community Reintegration, VA Rehabilitation Outcomes Conference, Miami, Florida. *The Journal of Rehabilitation Research and Development*, 49(1), 87. doi:10.1682/jrrd.2010.06.0107

Resnik, L., Plow, M., & Jette, A. (2009). Development of CRIS: Measure of community reintegration of injured service members. *The Journal of Rehabilitation Research and Development*, 46(4), 469. doi:10.1682/jrrd.2008.07.0082

Riggs, D. S. (2014). Traumatized relationships: Symptoms of posttraumatic stress disorder, fear of intimacy, and marital adjustment in dual trauma couples. *Psychological Trauma: Theory, Research, Practice, and Policy*, 6(3), 201–206. doi:10.1037/a0036405

Rosen, M. I., Ablondi, K., Black, A. C., Mueller, L., Serowik, K. L., Martino, S., … Rosenheck, R. A. (2014). Work outcomes after benefits counseling among veterans applying for service connection for a psychiatric condition. *Psychiatric Services*, 65(12), 1426–1432. doi:10.1176/appi.ps.201300478

Ross, P. T., Ravindranath, D., Clay, M., & Lypson, M. L. (2015). A greater mission: Understanding military culture as a tool for serving those who have served. *Journal of Graduate Medical Education*, 7(4), 519–522. doi:10.4300/jgme-d-14-

00568.1

Ruffa, C., Dandeker, C., & Vennesson, P. (2013). Soldiers drawn into politics? The influence of tactics in civil–military relations. *Small Wars & Insurgencies*, 24(2), 322–334. doi:10.1080/09592318.2013.778035

Rutherford, A. C., & Bu, F. (2018). Issues with the measurement of informal care in social surveys: Evidence from the English Longitudinal Study of Ageing. *Ageing & Society*, *38*(12), 2541-2559. doi:10.1017/s0144686x17000757

Saito, Y., Oguma, Y., Tajima, T., Kato, R., Kibayashi, Y., Miyachi, M., & Takebayashi, T. (2018). Association of high individual-level of social capital with increased physical activity among community-dwelling elderly men and women: a cross-sectional study. *Japanese Journal of Physical Fitness and Sports Medicine*, 67(2), 177–185. doi:10.7600/jspfsm.67.177

Sakurai, M., Spiro, E., & Gonzalez, J. J. (2017). Exploring effective ecosystems in disaster management: Case studies of Japan and Nepal. In *Proceedings of the 50th Hawaii International Conference on System Sciences*. doi:10.24251/hicss.2017.300

Sanchez, R. P., Bray, R. M., Vincus, A. A., & Bann, C. M. (2004). Predictors of job satisfaction among active duty and reserve/guard personnel in the U.S. military. *Military Psychology*, 16(1), 19–35. doi:10.1207/s15327876mp1601_2

Sawilowsky, S. S. (2009). New effect size rules of thumb. *Journal of Modern Applied Statistical Methods*, 8(2), 597–599. doi:10.22237/jmasm/1257035100

Sayer, N. A., Carlson, K. F., & Frazier, P. A. (2014). Reintegration challenges in U.S. service members and veterans following combat deployment. *Social Issues and Policy Review*, 8(1), 33–73. doi:10.1111/sipr.12001

Sayer, N. A., Orazem, R. J., Noorbaloochi, S., Gravely, A., Frazier, P., Carlson, K. F., … Oleson, H. (2014). Iraq and Afghanistan War veterans with reintegration problems: Differences by Veterans Affairs healthcare user status. *Administration and Policy in Mental Health and Mental Health Services Research*, 42(4), 493–503. doi:10.1007/s10488-014-0564-2

Scarpello, V., & Campbell, J. P. (1983). Job satisfaction: Are all the parts there? *Personnel psychology*, *36*(3), 577-600. doi:10.1111/j.1744-6570.1983.tb02236.x

Shandera-Ochsner, A. L., Berry, D. T. R., Harp, J. P., Edmundson, M., Graue, L. O., Roach, A., & High, W. M. (2013). Neuropsychological effects of self-reported deployment-related mild TBI and current PTSD in OIF/OEF Veterans. *The Clinical Neuropsychologist*, 27(6), 881–907. doi:10.1080/13854046.2013.802017

Sherman, M. D., Larsen, J., & Borden, L. M. (2015). Broadening the focus in supporting reintegrating Iraq and Afghanistan veterans: Six key domains of functioning. *Professional Psychology: Research and Practice*, 46(5), 355–365. doi:10.1037/pro0000043

Sherman, M. D., Larsen, J., Straits-Troster, K., Erbes, C., & Tassey, J. (2015). Veteran–child communication about parental PTSD: A mixed methods pilot study. *Journal of Family Psychology*, 29(4), 595–603. doi:10.1037/fam0000124

Shubik, M. (1970). Game theory, behavior, and the paradox of the prisoner's dilemma: *Three solutions. Journal of Conflict Resolution*, 14(2), 181-193. doi:10.1177/002200277001400204

Sigford, B. J. (2008). "To care for him who shall have borne the battle and for his widow and his orphan" (Abraham Lincoln): The Department of Veterans Affairs polytrauma system of care. *Archives of physical medicine and rehabilitation*, *89*(1), 160-162. doi:10.1016/j.apmr.2007.09.015

Smith, D. (2015). Dual-military families: Confronting a stubborn military institution. In R. Moelker, M. Andres, G. Bowen, P. Manigart (Eds.), *Military families and war in the 21st century: Comparative perspectives.* (pp. 57-72) London: Routledge. doi:10.4324/9780203407530

Smith, R. T., & True, G. (2014). Warring identities. *Society and Mental Health*, 4(2), 147–161. doi:10.1177/2156869313512212

Stokols, D. (1992). Establishing and maintaining healthy environments: Toward a social ecology of health promotion. *American Psychologist*, 47(1), 6–22. doi:10.1037/0003-066x.47.1.6

Stokols, D. (1996). Translating social ecological theory into guidelines for community health promotion. *American Journal of Health Promotion*, 10(4), 282–298. doi:10.4278/0890-1171-10.4.282

Sullivan, C. P., & Elbogen, E. B. (2014). PTSD symptoms and family versus stranger violence in Iraq and Afghanistan veterans. *Law and Human Behavior*, 38(1), 1–9.

doi:10.1037/lhb0000035

Sullivan, G. M., & Feinn, R. (2012). Using effect size—or why the P-value is not enough. *Journal of Graduate Medical Education*, 4(3), 279–282. doi:10.4300/jgme-d-12-00156.1

Tenhula, W. N., Nezu, A. M., Nezu, C. M., Stewart, M. O., Miller, S. A., Steele, J., & Karlin, B. E. (2014). Moving forward: A problem-solving training program to foster veteran resilience. *Professional Psychology: Research and Practice*, 45(6), 416–424. doi:10.1037/a0037150

Tewary, S., Cook, N., Pandya, N., & McCurry, S. M. (2016). Pilot test of a six-week group delivery caregiver training program to reduce sleep disturbances among older adults with dementia (Innovative practice). Dementia, 17(2), 234–243. doi:10.1177/1471301216643191

Townsend, L., Wallace, C., Smart, A., & Norman, T. (2014). Building virtual bridges: how rural micro-enterprises develop social capital in online and face-to-face settings. *Sociologia Ruralis*, 56(1), 29–47. doi:10.1111/soru.12068

Tsai, J., & Rosenheck, R. A. (2013). Examination of veterans affairs disability compensation as a disincentive for employment in a population-based sample of veterans under age 65. *Journal of Occupational Rehabilitation*, 23(4), 504–512. doi:10.1007/s10926-013-9419-z

Twamley, E. W., Baker, D. G., Norman, S. B., Pittman, J. O. E., Lohr, J. B., & Resnick, S. G. (2013). Veterans Health Administration vocational services for Operation

Iraqi Freedom/Operation Enduring Freedom Veterans with mental health conditions. *The Journal of Rehabilitation Research and Development*, 50(5), 663. doi:10.1682/jrrd.2012.08.0137

U.S. Census Bureau. (2017). 2016 American Community Survey 1-year estimates. Retrieved from: https://factfinder.census.gov.

U.S. Department of Defense (2017). 2016 Demographics: Profile of the military community. Retrieved from https://militaryonesource.mil

Veterans' Benefits, 38 C.F.R. § 1710 (2002).

Vogt, D., Perkins, D. F., Copeland, L. A., Finley, E. P., Jamieson, C. S., Booth, B., … Gilman, C. L. (2018). The Veterans Metrics Initiative study of US veterans' experiences during their transition from military service. BMJ Open, 8(6), e020734. doi:10.1136/bmjopen-2017-020734

Vygotsky, L. (1978). Interaction between learning and development. *Readings on the development of children*, 23(3), 34-41.

Wadsworth, S. M., Lester, P., Marini, C., Cozza, S., Sornborger, J., Strouse, T., & Beardslee, W. (2013). Approaching family-focused systems of care for military and veteran families. *Military Behavioral Health*, 1(1), 31–40. doi:10.1080/21635781.2012.721062

Walsh, T. B., & Nieves, B. (2017). Military moms: Deployment and reintegration challenges to motherhood. *Integrating Psychiatry and Primary Care*, 213–225. doi:10.1007/978-3-319-65724-0_14

Wands, L. (2013). “No one gets through it OK.” *Advances in Nursing Science*, 36(3), 186–199. doi:10.1097/ans.0b013e31829edcbe

Werber, L., Schaefer, A., Osilla, K., Wilke, E., Wong, A., Breslau, J., & Kitchens, K. (2013). *Support for the 21st century reserve force: Insights on facilitating successful reintegration for citizen warriors and their families*. Santa Monica, CA: RAND Corporation.

Wilson, S. R., Marini, C. M., Franks, M. M., Whiteman, S. D., Topp, D., & Wadsworth, S. M. (2018). Communication and connection during deployment: A daily-diary study from the perspective of at-home partners. *Journal of Family Psychology*, 32(1), 42-48. doi:10.1037/fam0000333

Worthen, M., & Ahern, J. (2014). The Causes, Course, and Consequences of Anger Problems in Veterans Returning to Civilian Life. *Journal of Loss and Trauma*, 19(4), 355–363. doi:10.1080/15325024.2013.788945

Vogt, D. S., Pless, A. P., King, L. A., & King, D. W. (2005). Deployment stressors, gender, and mental health outcomes among Gulf War I veterans. *Journal of Traumatic Stress*, 18(2), 115-127. doi:10.1002/jts.20044

Vogt, D., Smith, B. N., King, L. A., King, D. W., Knight, J., & Vasterling, J. J. (2013). Deployment Risk and Resilience Inventory-2 (DRRI-2): An updated tool for assessing psychosocial risk and resilience factors among service members and veterans. *Journal of Traumatic Stress*, 26(6), 710–717. doi:10.1002/jts.21868

Zaleski, K. (2015). Trauma and recovery within military culture. In *Understanding and*

treating military sexual trauma: Focus on sexuality research. 37-48. Springer, Cham. doi:10.1007/978-3-319-16607-0_3

Appendix A: Codebook for Study

Demographic Questions

Verification: (4 questions)

V1 (Theater): What was one Theater of Operation that you served a combat deployment in?

Responses:

Operation Iraqi Freedom (OIF) (coded 1)
Operation Enduring Freedom (OEF) (coded 2)
Operation New Dawn (OND) (coded 3)
Operation Inherent Resolve (OIR) (coded 4)
Prefer not to answer (this response will redirect individuals to the webpage that thanks them for participating)

V2 (Unit): What was the name of one unit that you served with during your combat deployment?

Responses:

Open Response (coded 1 for reasonable name of unit; coded 0 and removal of scores for not)
Prefer not to answer (this response will redirect individuals to the webpage that thanks them for participating)

V3 (MOS): What was the Military Operation Specialty or Air Force Specialty Code that you were assigned?

Responses:

Open Response (coded 1 for reasonable MOS/AFSC; coded 0 and removal of scores for not)
Prefer not to answer (this response will redirect individuals to the webpage that thanks them for participating)

V4 (Times): How many times were you deployed to a combat zone since 2001?

Responses:

Numeric Response
Prefer not to answer (this response will redirect individuals to the webpage that thanks them for participating)

Demographics: (11 questions)

D1 (Age): What is your current age?

Responses:
Numeric Response

D2 (Age1): How old were you at the end of your military service?
Responses:
Numeric Response

D2.1(Years): This is a compilation of the responses from D1 and D2 to find the amount of time difference between the two.
Responses:
Numeric Response

D3 (Sex): What gender do you identify with?
Responses:
Male (coded 1)
Female (coded 2)
Transgender/Non-Binary (coded 3)
Prefer not to answer (coded 0)

D4 (Race): What is your race/ethnicity?
Responses:
White (Caucasian) (coded 1)
Black (African-American) (coded 2)
Asian (coded 3)
American Indian or Alaska Native (coded 4)
Native Hawaiian or other Pacific Islander (coded 5)
Multi-racial (coded 6)
Other (coded 7)
Prefer not to answer (coded 0)

D5 (Education): What is your highest level of education?
Responses:
High school degree or equivalent (e.g., GED) (coded 1)
Some college but no degree (coded 2)
Associate degree (A.A., A.S., etc.) (coded 2)
Bachelor degree (B.A., B.S., etc.) (coded 2)
Graduate degree (M.A., M.S., etc.) (coded 3)
Doctoral or professional degree (Ph.D., M.D., etc.) (coded 3)
Prefer not to answer (coded 0)

D6 (Branch): What branch did you serve under?
Responses:

Army (coded 1)
Navy (coded 2)
Air Force (coded 3)
Marines (coded 4)
Coast Guard (coded 5)
National Guard (coded 6)
Reserves (coded 7)
Prefer not to answer (coded 0)

D7 (Political): What political party are you affiliated with?
Responses:
Republican (coded 1)
Democrat (coded 2)
Third party (coded 3)
Do not know (coded 88)
Prefer not to answer (coded 99)

D8 (Location): What type of location do you currently live?
Responses:
Urban location (coded 1)
Suburban location (coded 2)
Rural location (coded 3)
Prefer not to answer (coded 0)

D8.1 (Location1): Do you live in a military community? (Example - locations outside of a military base)
Responses:
Yes (coded 1)
No (coded 2)
Prefer not to answer (coded 0)

D9 (TIS): How long did you serve in the military?
Responses:
Did not finish initial contract or commitment (coded 1)
Completed initial contract or commitment (coded 2)
Continued past initial contract or commitment (coded 3)
Retired from military service (coded 4)
Prefer not to answer (coded 0)

D10 (Rank1): What was your rank at the end of your service or highest rank achieved?

Responses:

E1	E8	O1	O8
E2	E9	O2	O9
E3	W01	O3	O10
E4	CW2	O4	Prefer not to
E5	CW3	O5	answer
E6	CW4	O6	
E7	CW5	O7	

D10.1 (Rank): What was your rank at the end of your service or highest rank achieved?

Responses:

E1	W01	O5
E2	CW2	O6
E3	CW3	O7
E4	CW4	O8
E5	CW5	O9
E6	O1	O10
E7	O2	Prefer not to
E8	O3	answer
E9	O4	

D11 (Reason): Who made the decision to end your military service?

Responses:

Voluntary decision: your decision or family decision (coded 1)
Involuntary decision: military's or government's decision (coded 2)
Prefer not to answer (coded 0)

D11.1 (Reason1): Why did your military service end?

Responses:

Retirement (coded 1)
End of contract (coded 2)
Medical reasons (coded 3)
Force draw down that began in 2014 (coded 4)
Legal (coded 5)
Other (coded 6)
Prefer not to answer (coded 0)

Military Job Satisfaction Questions

(5 questions)

JS1 (Satisfaction): All in all, how satisfied would you say you were with your job in the military?

Responses:

Very satisfied (scored as 5)
Satisfied (scored as 4)
Neither satisfied nor unsatisfied (scored as 3)
Dissatisfied (scored as 2)
Very dissatisfied (scored as 1)
Prefer not to answer (scored as mean)

JS2 (Recommendation): If a good friend of yours told you (he/she) was interested in joining the military, what would you recommend that (he/she) join?

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

JS3 (Redo): Knowing what you know now, if you had to decide all over again whether or not to join the military, what would you decide?

Responses:

Join the military (scored as 1)

Not join the military (scored as 0)
Prefer not to answer (scored as mean)

JS4 (Measure): In general, how well would you say that your job measured up to the sort of job you wanted when you joined?

Responses:

Was what I expected (scored as 1)
Was not what I expected (scored as 0)
Prefer not to answer (scored as mean)

JS5 (Ideal): If you were free to go into any type of job you wanted, what would your choice be?

Responses:

Open Response (scored as 1 if they put in the military or their job in the military; scored as 0 if they put anything else)

Scores will be added together. The final score of the response will then be divided by the total possible score (9), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Post-Deployment Stressors Questions

(14 questions)

PDS1 (robbed): Since returning from your most recent deployment I was robbed or had my home broken into.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS2 (sexual assault): Since returning from your most recent deployment I experienced unwanted sexual activity as a result of force, threat or harm, or manipulation.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS3 (divorce): Since returning from your most recent deployment I went through a divorce or have been left by a partner or significant other.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS4 (healthcare): Since returning from your most recent deployment I had problems getting access to adequate healthcare.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS5 (natural disaster): Since returning from your most recent deployment I experienced a natural disaster (for example, a hurricane), a fire, or an accident in which I or someone close to me was hurt or had serious property damage.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS6 (partner illness): Since returning from your most recent deployment someone close to me has experienced a serious illness, injury, or mental health problem (for example, cancer, alcohol/drug problem).

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS7 (witness): Since returning from your most recent deployment I have witnessed someone being seriously assaulted or killed.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS8 (job): Since returning from your most recent deployment I have lost my job or had serious trouble finding a job.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS9 (emotional): Since returning from your most recent deployment I have been emotionally mistreated (for example, ignored or repeatedly told I was no good).

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS10 (finances): Since returning from your most recent deployment I have experienced serious financial problems.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS11 (mental health): Since returning from your most recent deployment I have experienced serious physical or mental health problems.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS12 (legal): Since returning from your most recent deployment I have experienced stressful legal problems (for example, being sued, suing someone else, or being in a custody battle).

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS13 (injured): Since returning from your most recent deployment I have been seriously physically injured by another person (for example, hit or beaten up).

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

PDS14 (death): Since returning from your most recent deployment someone close to me has died.

Responses:

Yes (scored as 1)
No (scored as 0)
Prefer not to answer (scored as mean)

Scores will be added together. The final score of the response will then be divided by the total possible score (14), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Post-Deployment Support Level Questions

(10 questions)

PDSS1(At home): Since returning from your most recent deployment the American people made me feel at home

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS2 (Proud): Since returning from your most recent deployment people made me feel proud to have served my country in the Armed Forces.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS3 (Feelbetter): Since returning from your most recent deployment my family members and/or friends make me feel better when I am down.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS4 (Advice): Since returning from your most recent deployment I can go to family members or friends when I need good advice.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)

Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS5 (Understanding): Since returning from your most recent deployment my family and friends understand what I have been through in the Armed Forces.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS6 (Talkabout): Since returning from your most recent deployment people there are family and/or friends with whom I can talk about my deployment experiences.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS7 (money): Since returning from your most recent deployment my family members or friends would lend me money if I needed it.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS8 (move): Since returning from your most recent deployment my family members or friends would help me move my belongings if I needed help.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)

Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS9 (chores): Since returning from your most recent deployment if I were unable to attend to daily chores, there is someone who would help me with these tasks.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PDSS10 (ill): Since returning from your most recent deployment when I am ill, family members or friends will help out until I am well.

Responses:

Strongly disagree (scored as 1)
Somewhat disagree (scored as 2)
Neither agree nor disagree (scored as 3)
Somewhat agree (scored as 4)
Strongly agree (scored as 5)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

Scores will be added together. The final score of the response will then be divided by the total possible score (50), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Civic Engagement Questions

Political participation. (10 questions)

PP1 (interest in politics): How interested are you in politics and national affairs? Are you. . .

Responses:

Extremely interested (scored as 5)
Very interested (scored as 4)
Somewhat interested (scored as 3)

Only slightly interested (scored as 2)
Not at all interested (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP2 (political issues): How easy do you find it to make up your mind about political issues?

Responses:

Extremely easy (scored as 5)
Very easy (scored as 4)
Easy (scored as 3)
Slightly easy (scored as 2)
Not easy at all (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP3 (local elections): Did you vote in the last local / municipal elections?

Responses:

Yes (scored as 1)
No (scored as 0)
Was not eligible (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP4 (national elections): Did you vote in the last national elections?

Responses:

Yes (scored as 1)
No (scored as 0)
Was not eligible (scored as mean)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5 (actions): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12 months have you done any of the following: contacted a politician – either a national or local government official?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5.1 (actions1): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12

months have you done any of the following: worked in a political party or action group?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5.2 (actions2): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12 months have you done any of the following: Worked in another organization or association?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5.3 (actions3): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12 months have you done any of the following: worn or displayed a campaign badge, sticker, or other memorabilia?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5.4 (actions4): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12 months have you done any of the following: signed a petition (online or in person)?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5.5 (actions5): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12 months have you done any of the following: taken part in a lawful public demonstration?

Responses:

Yes (scored as 1)

No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP5.6 (actions6): There are different ways of trying to improve things in the United States or help prevent things from going wrong. During the last 12 months have you done any of the following: boycotted certain products?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP6 (party membership): Are you a member of any political party?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP7 (good citizen): To be a good citizen, how important would you say it is for a person to support people who are worse off than themselves?

Responses:

Extremely important (scored as 5)
Very important (scored as 4)
Important (scored as 3)
Slightly important (scored as 2)
Not important (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP7.1 (good citizen1): To be a good citizen, how important would you say it is for a person to vote in election?

Responses:

Extremely important (scored as 5)
Very important (scored as 4)
Important (scored as 3)
Slightly important (scored as 2)
Not important (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP7.2 (good citizen2): To be a good citizen, how important would you say it is for a person to always obey laws and regulations?

Responses:

Extremely important (scored as 5)
Very important (scored as 4)
Important (scored as 3)
Slightly important (scored as 2)
Not important (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP7.3 (good citizen3): To be a good citizen, how important would you say it is for a person to form their own opinions – independently of others?

Responses:

Extremely important (scored as 5)
Very important (scored as 4)
Important (scored as 3)
Slightly important (scored as 2)
Not important (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP7.4 (good citizen4): To be a good citizen, how important would you say it is for a person to be active in voluntary organizations?

Responses:

Extremely important (scored as 5)
Very important (scored as 4)
Important (scored as 3)
Slightly important (scored as 2)
Not important (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP7.5 (good citizen5): To be a good citizen, how important would you say it is for a person to be active in politics?

Responses:

Extremely important (scored as 5)
Very important (scored as 4)
Important (scored as 3)
Slightly important (scored as 2)
Not important (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP8 (ability) How confident are you in your own ability to participate in politics?

Responses:

Completely confident (scored as 5)
Very confident (scored as 4)
Quite confident (scored as 3)
A little confident (scored as 2)
Not at all confident (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP9 (influence) How much would you say that the political system in the United States allows people like you to have an influence on politics?

Responses:

A great deal (scored as 5)
A lot (scored as 4)
Some (scored as 3)
Very little (scored as 2)
Not at all (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP10 (attached) How emotionally attached do you feel to the United States?

A great deal (scored as 5)
A lot (scored as 4)
Some (scored as 3)
Very little (scored as 2)
Not at all (scored as 1)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

PP_TP (PP Total Points). This will be the end tally of this section of the variable, which will be used in the final compilation of the composite score for civic engagement.

PP_COM (PP Composite Score). Scores will be added together. The final score of the response will then be divided by the total possible score (65), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study

Social participation. (10 questions)

SP1 (interactions): How often do you interact socially with friends, relatives, or work colleagues? This includes virtual (phone call, email, text, online gaming, etc.) or meeting in person.

Responses:

Every day (scored as 6)
Several times a week (scored as 5)
Once a week (scored as 4)
Several times a month (scored as 3)
Once a month (scored as 2)
Less than once a month (scored as 1)
Never (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP2 (social interactions): How often do you meet socially with friends, relatives, or work colleagues?

Responses:

Every day (scored as 6)
Several times a week (scored as 5)
Once a week (scored as 4)
Several times a month (scored as 3)
Once a month (scored as 2)
Less than once a month (scored as 1)
Never (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP3 (comparison): Compared to other people your own age, how often would you say you take part in social activities?

Responses:

Much more than most (scored as 4)
More than most (scored as 3)
About the same (scored as 2)
Less than most (scored as 1)
Much less than most (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP4 (religion): Do you consider yourself as belonging to any particular religion, denomination, or religious group?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP5 (religious level): Regardless of whether you belong to a particular religion, how religious would you say you are?

Responses

Completely religious (scored as 4)
Very religious (scored as 3)
Religious (scored as 2)
Slightly religious (scored as 1)
Not religious (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP6 (Attend service): Apart from special occasion such as weddings and funerals, about how often do you attend religious services nowadays?

Responses:

Every day (scored as 6)
Several times a week (scored as 5)
Once a week (scored as 4)
Several times a month (scored as 3)
Once a month (scored as 2)
Less than once a month (scored as 1)
Never (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP7 (pray): Apart from when you are at religious services, how often, if at all, do you pray?

Responses:

Every day (scored as 6)
Several times a week (scored as 5)
Once a week (scored as 4)
Several times a month (scored as 3)
Once a month (scored as 2)
Less than once a month (scored as 1)
Never (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP8 (safe) How safe do you – or would you – feel walking alone in your surrounding area after dark?

Responses:

Completely safe (scored as 4)
Very safe (scored as 3)
Mostly safe (scored as 2)
Somewhat safe (scored as 1)

Not very safe (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP9 (health) How is your health in general? Would you say that it is…
Responses:
Extremely good (scored as 4)
Very good (scored as 3)
Good (scored as 2)
Fair (scored as 1)
Poor (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP10 (happy) Taking all things together, how happy would you say you are?
Responses:
Completely happy (scored as 4)
Very happy (scored as 3)
Quite happy (scored as 2)
A little happy (scored as 1)
Not at all happy (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

SP_TP (SP Total Points). This will be the end tally of this section of the variable, which will be used in the final compilation of the composite score for civic engagement.

SP_COM (SP Composite Score). Scores will be added together. The final score of the response will then be divided by the total possible score (45), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Volunteering and reciprocity. (4 questions)

VR1 (contributions): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: religious organizations?
Responses:
Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)

Prefer not to answer (scored as mean)

VR1.1 (contributions1): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: political clubs or political party committees?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.2 (contributions2): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: professional societies, trade or business associations?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.3 (contributions3): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: labor unions?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.4 (contributions4): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: farm organizations?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.5 (contributions5): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: organizations that work on health issues?

Responses:

Yes (scored as 1)
No (scored as 0)

Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.6 (contributions6): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: environmental or animal protection groups?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.7 (contributions7): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: other public interest or political action groups?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.8 (contributions8): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: social clubs, Greek fraternities and sororities, college clubs or alumni associations?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.9 (contributions9): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: health clubs, sports clubs, athletic leagues, country clubs, or swimming pools?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.10 (contributions10): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: ethnic, nationality, or civil rights organizations?

Responses:
Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.11 (contributions11): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: hobby, garden, or recreational groups?
Responses:
Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.12 (contributions12): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: literary, art, cultural organizations, historical societies?
Responses:
Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.13 (contributions13): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: veterans' groups?
Responses:
Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.14 (contributions14): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: social service organizations?
Responses:
Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.15 (contributions15): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: neighborhood or homeowners associations?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.16 (contributions16): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: fraternal groups like Rotary?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.17 (contributions17): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: PTA, PTO, or school support groups?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.18 (contributions18): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: clubs or organizations for older people?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR1.19 (contributions19): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: any other civic or community organizations including the fire department or police?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)

Prefer not to answer (scored as mean)

VR1.20 (contributions20): In the past 12 months have you been a member, made contributions or supporting, or participating by donating money or time of the following groups: support or self-help groups?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR2 (volunteer): In the past 12 months, have you volunteered any of your time to organizations such as charities, schools, hospitals?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR3 (treatment by others): Do you think that most people would try to be fair to you or take advantage of you?

Responses:

Most people would try to be fair (scored as 5)
Some people would try to be fair (scored as 4)
A few people would try to be fair (scored as 3)
A few people would try to take advantage (scored as 2)
Some people would try to take advantage (scored as 1)
Most people would try to take advantage (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR4 (other peoples' helpfulness): Would you say that most of the time people try to be helpful or that they are mostly looking out for themselves?

Responses:

Most people try to be helpful (scored as 5)
Some people try to be helpful (scored as 4)
A few people try to be helpful (scored as 3)
A few people look out for themselves (scored as 2)
Some people look out for themselves (scored as 1)
Most people look out for themselves (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

VR_TP (VR Total Points). This will be the end tally of this section of the variable, which will be used in the final compilation of the composite score for civic engagement.

VR_COM (VR Composite Score). Scores will be added together. The final score of the response will then be divided by the total possible score (32), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

CE_COM (CE Composite Score). Overall civic engagement will be obtained using the average for the political participation, social participation, as well as volunteering and reciprocity scores. The final score of the responses will then be divided by the total possible score (131), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Community Reintegration Questions

Trust. (2 questions)

T1 (trust of others): Generally speaking, would you say that most people can be trusted, or that you can't be too careful in dealing with other people?

Responses:

Most people can be trusted (scored as 5)
Some people can be trusted (scored as 4)
A few people can be trusted (scored as 3)
A few people cannot be trusted (scored as 2)
Some people cannot be trusted (scored as 1)
Most people cannot be trusted (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

T2 (national trust): How much do you personally trust each of the following institutions: national government?

Responses:

Complete trust (scored as 5)
Mostly trust (scored as 4)
Somewhat trust (scored as 3)
Somewhat distrust (scored as 2)
Mostly distrust (scored as 1)
Completely distrust (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

T2.1 (legal trust): How much do you personally trust each of the following institutions: the legal system?

Responses:

Complete trust (scored as 5)
Mostly trust (scored as 4)
Somewhat trust (scored as 3)
Somewhat distrust (scored as 2)
Mostly distrust (scored as 1)
Completely distrust (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

T2.2 (police trust): How much do you personally trust each of the following institutions: the police?

Responses:

Complete trust (scored as 5)
Mostly trust (scored as 4)
Somewhat trust (scored as 3)
Somewhat distrust (scored as 2)
Mostly distrust (scored as 1)
Completely distrust (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

T2.3 (politicians trust): How much do you personally trust each of the following institutions: politicians?

Responses:

Complete trust (scored as 5)
Mostly trust (scored as 4)
Somewhat trust (scored as 3)
Somewhat distrust (scored as 2)
Mostly distrust (scored as 1)
Completely distrust (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

T2.4 (party trust): How much do you personally trust each of the following institutions: political parties?

Responses:

Complete trust (scored as 5)
Mostly trust (scored as 4)
Somewhat trust (scored as 3)
Somewhat distrust (scored as 2)
Mostly distrust (scored as 1)

Completely distrust (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

T_TP (T Total Points). This will be the end tally of this section of the variable, which will be used in the final compilation of the composite score for civic engagement.

T_COM (T Composite Score). Scores will be added together. The final score of the response will then be divided by the total possible score (30), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Support. (5 questions)

S1 (confidante): Do you have anyone with whom you can discuss intimate and/or personal matters?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

S2 (confide): How comfortable are you discussing personal issues such as feelings, beliefs, and/or experiences with members of your family?

Responses:

I can discuss all personal issues (scored as 5)
I can discuss almost all personal issues (scored as 4)
I can discuss most personal issues (scored as 3)
I can discuss some personal issues (scored as 2)
I can discuss a few personal issues (scored as 1)
I cannot discuss personal issues (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

S3 (children): Do you have any children or grandchildren living with you at home?

Responses:

Yes (scored as 1)
No (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

S4 (confide1): How comfortable are you discussing personal issues such as feelings, beliefs, and/or experiences with people that you know?

Responses:

I can discuss all personal issues (scored as 5)
I can discuss almost all personal issues (scored as 4)
I can discuss most personal issues (scored as 3)
I can discuss some personal issues (scored as 2)
I can discuss a few personal issues (scored as 1)
I cannot discuss personal issues (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

S5 (confide2): How comfortable are you discussing personal issues such as feelings, beliefs, and/or experiences with people that you do not know?

Responses:

I can discuss all personal issues (scored as 5)
I can discuss almost all personal issues (scored as 4)
I can discuss most personal issues (scored as 3)
I can discuss some personal issues (scored as 2)
I can discuss a few personal issues (scored as 1)
I cannot discuss personal issues (scored as 0)
Do not know (scored as mean)
Prefer not to answer (scored as mean)

S_TP (S Total Points). This will be the end tally of this section of the variable, which will be used in the final compilation of the composite score for civic engagement.

S_COM (S Composite Score). Scores will be added together. The final score of the response will then be divided by the total possible score (17), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

CR_COM (CR Composite Score). Overall community reintegration variable will be determined as the average from the composite scores of trust and support. The final score of the responses will then be divided by the total possible score (47), and then multiplied by 100 to find composite score, which will be entered as a continuous variable for the study.

Appendix B: Military Job Satisfaction Scale Permission

Title: Facet-free Job Satisfaction Index

Record Type: Master Test Record

Test Year: 1973

Test Child Records: Facet-free Job Satisfaction Index [Test Development]
Evaluating weighted models of measuring job satisfaction: A Cinderella story. (AN: 1974-10072-001 from PsycINFO) Aug, 1973.
Authors: Quinn, Robert P.; Mangione, Thomas W.;
Source: Organizational Behavior & Human Performance. 10(1), Elsevier Science, Netherlands.
Age Group: Adulthood (18 yrs & older)
Population: Human; Male; Female; Sample: National Probability Sample of 1533 American Workers
Keywords: Facet-Free Job Satisfaction Index; Test Development; Factor Structure;
Subjects: Factor Structure; Job Satisfaction; Test Construction;

Authors: Quinn, Robert P., University of Michigan, Survey Research Center, Michigan, United States
Mangione, Thomas W., University of Michigan, Survey Research Center, Michigan, United States

Source: PsycTESTS, 1973.

Language: English

Construct: Job Satisfaction

Purpose: The purpose of this Index is to examine workers' overall job satisfaction.

Description: In research assessing the validity of ten methods of weighting job satisfaction ratings by importance ratings, a Facet-free Job Satisfaction Index (Quinn & Mangione, 1973) was developed. Participants were American workers. The Index estimated each worker's overall job satisfaction from his responses to five questions that in no way referred to specific facets of his job (e.g., 'All in all, how satisfied would you say you are with your job?'). Participants were presented with fixed-alternative response categories for the first four questions. The fifth, which asked participants about their ideal job, was coded in terms of whether or not they chose their present job. The Index was employed in a multiple regression analysis with a measure of 23 facet-specific satisfaction items. (PsycTESTS Database Record (c) 2015 APA, all rights reserved)

Format: The first 4 questions have fixed-alternative response categories. The 5th question is coded in terms of whether or not participants choose their present job.

Instrument Type: Index/Indicator

Administration Method: Interview

PsycTESTS Classification: Organizational, Occupational, and Career Development (7000)

Commercial Availability: No

Permissions: May use for Research/Teaching

Fee: No

Test Location: Text, Page 7

Release Date: 20130708

Correction Date: 20151109

Appendix C: European Social Survey Permission

Dear Nicole,

Thank you for your query and interest in the European Social Survey. We are glad to hear that you are considering to use some ESS items for your study.

The ESS data and documentation, including the questionnaires from previous rounds, are available without restrictions for not-for-profit purposes. Our conditions of use are described more in detail on the following page:
http://www.europeansocialsurvey.org/data/conditions_of_use.html
If you use any items from the ESS questionnaires, please cite the ESS following the citation format listed on the first page of each questionnaire.

Do not hesitate to contact us should you have any other query.

Kind regards,
Luca Salini

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Luca Salini
Researcher, European Social Survey ERIC

Appendix D: Post-Deployment Stressors and Support Scales Permission

Dear Ms. Cmerek,

Thank you for your interest in the Deployment Risk and Resilience Inventory (DRRI). The full inventory of updated DRRI-2 scales is attached, as well as the manual that accompanies it. The DRRI-2 is a psychometrically sound instrument that can be used to assess predeployment/prewar, deployment/war-zone, and postdeployment/postwar risk and resilience factors for stress-related illnesses.

Additionally, I thought you might be interested in another recent inventory my colleagues and I developed, which is referred to as the Well-Being Inventory (WBI). The WBI is a psychometrically sound instrument that provides a multidimensional assessment of military veterans' status, functioning, and satisfaction with regard to vocation, finances, health, and social relationships. The measures that comprise the WBI were designed to be brief and researchers may choose a subset of scales that best meet their specific needs.

A copy of the WBI and a manual that describes the development and validation of this instrument are also attached. Please note that the manual is in draft form at this point, as we are still in the process of finalizing norms. If you would like a copy of the finalized manual, I would be happy to send it to you when it is complete.

Appendix E: Invitation for Study Participation

Dear Prospective Survey Participant,

I am a doctoral candidate from Walden University, and I am conducting a research study as part of my doctoral degree requirements. My study is entitled, *The Impact of Perceptions: Assessing the Effect of Combat Experience as a Means of Activating Civic Engagement*. This is an invitation to participate in this research study. The purpose of this study is to study the role of civic engagement upon combat veterans' reintegration efforts.

By agreeing to participate in the study, you will be giving your consent for the researcher or principal investigator to include your responses in her data analysis. Your participation in this research study is strictly voluntary, and you may choose not to participate without fear of penalty or any negative consequences. You will be able to withdraw from the survey at any time and all survey responses will be deleted, including the informed consent agreement.

An informed consent agreement will appear on the first screen page of the survey. There will be no individually identifiable information, remarks, comments or other identification of you as an individual participant. All results will be presented as aggregate, summary data. If you wish, you may request a copy of the results of this research study after it is completed by following the link: https://www.facebook.com/pg/CombatVeteranReintegration

The survey will last no more than 30 minutes. Your participation will contribute to the current literature on the subject of community reintegration of combat veterans. No direct compensation will be offered for your participation, however once the study has completed a donation of $5.00 per fully completed surveys will be donated to the Iraq and Afghanistan Veterans Association (IAVA).

Walden University's approval number for this study is 02-21-19-0315547 and it expires February 20, 2020. If you would like to know more information about this study, an information letter can be obtained by sending a request to

If you decide to participate after reading this letter, you can access the survey from a link at: https://www.facebook.com/pg/CombatVeteranReintegration

Thank you for your consideration,

Nicole Cmerek

Appendix F: Protecting for Human Research Participants Certificate

Certificate of Completion

The National Institutes of Health (NIH) Office of Extramural Research certifies that **Nicole Cmerek** successfully completed the NIH Web-based training course "Protecting Human Research Participants."

Date of Completion: 09/07/2015

Certification Number: 2748648

NIH National Institutes of Health
Office of Extramural Research

Appendix G: Debrief for the Study

Thank you for your participation in our study! Your participation is greatly appreciated.

Purpose of the Study:

We previously informed you that the purpose of the study was to examine the reintegration efforts of combat veterans following the end of their military service. The goal of our research is to determine the level of reintegration of participants as well as factors that increase or lessen these efforts.

We realize that some of the questions asked may have provoked strong emotional reactions. As researchers, we do not provide mental health services and we will not be following up with you after the study. However, we want to provide every participants in this study with a comprehensive and accurate list of clinical resources that are available, should you decide you need assistance at any time. Please see information pertaining to veteran resources at the end of this form.

Final Report:

If you would like to receive a copy of the final report of this study (or a summary of the findings) when it is completed, please feel free to contact us.

Useful Contact Information:

If you have any questions or concerns regarding this study, its purpose or procedures, or if you have a research-related problem, please feel free to contact the researcher,

If you feel upset after having completed the study or find that some questions or aspects of the study triggered distress, talking with a qualified clinician may help. If you feel you would like assistance please contact the Veteran's Crisis Line - 1 (800) 273-8255 and Press 1. ***In a serious emergency, remember that you can also call 911 for immediate assistance.***

Confidentiality:

You may decide that you do not want your data used in this research. If you would like your data removed from the study and permanently deleted please indicate in the box below.

Whether you agree or do not agree to have your data used for this study, we will still donate to the IAVA for your participation.

Please do not disclose research procedures and/or hypotheses to anyone who might participate in this study in the future as this could affect the results of the study.

Walden University's approval number for this study is 02-21-19-0315547 and it expires February 20, 2020.

*****Please keep a copy of this form for your future reference. Once again, thank you for your participation in this study!*****