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U.S. Military Veteran Identity and Civilian Adjustment

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U.S. Military Veteran Identity and Civilian Adjustment

Abstract

U.S. military veterans transitioning back into the civilian sector often experience a variety of challenges and need to readjust into non-military environments. In order to examine the psychological challenges involved in the transition and readjustment processes among U. S. active military veterans, a qualitative study was conducted. For 6 months, data was collected from veterans in California, Nevada, Texas, Florida, and New York. Following an IRB approval, semi-structured open-ended self-developed interviews were developed and conducted with sixteen military veterans who have served in 4 branches of the U.S. Armed Forces: Army, Navy, Air Force, and Marine Corps. Data and information collected included social and military demographics, as well as experience with the veterans' identity before, during, and after serving in the military. The aims of this study were: 1) To identify self-concept and development with military identity 2) To investigate the relationship between identity disruption and criteria for adjustment disorder (following the DSM-5-TR definitions), and 3) Single out psychosocial factors that helped or could have helped with identity readjustment into the civilian sector. Themes related to veterans' identity and civilian adjustment were important factors post-military discharge.

Keywords

Identity, veteran, adjustment, mental health, transition, military

U.S. Military Veteran Identity and Civilian Adjustment

Introduction

U.S. military veterans served, defended, and sacrificed their lives for their country. Throughout U.S. history there have been many military campaigns, operations, and missions. According to the Code of Federal Regulations (CFR) Title 38, a veteran is “a person who served in the active military, naval, or air service and who was discharged or released under conditions other than dishonorable” [1]. U.S. military veterans face many psychological, psychosocial, and medical challenges that make civilian adjustment difficult. This study aims to build on existing research on U.S. military veterans’ mental health, identity, and civilian adjustment.

McCaslin et al. (2021) completed a study to understand veterans’ perception of military culture and continued identification in the civilian sector [2]. Veterans had high reports of continued military culture values, beliefs, and behaviors in different aspects of the civilian sector e.g., relationships, values, beliefs, behaviors, occupational practices, etc. [2]. Veterans centralize themselves strongly with their military identity and the special values, expectations, and experiences that come with their specific military role.

Mitchell et al. (2020) completed a study on identity disruption and associations with mental health among military veterans and their difficulty reintegrating back into the civilian sector [3]. They discussed how development and identity stage theories have not been thoroughly explored as much for military veterans having readjustment difficulties [3]. Their study found significant findings with identity disruption for military veterans and had higher reports of PTSD symptoms, lower life satisfaction, lower social support, and difficulty with reintegration [3].

Veterans have adopted military values, beliefs, occupational practices, social peers, and military culture that can affect a veteran's identity after their military discharge [2] [3].

Edwards et al. (2022) completed a narrative review of the reintegration difficulty with identity in the civilian context [4]. Military members benefit from the structure, support, and mentorship from leaders and different transitional military stages; transitioning into basic training, basic training to the first military installation, and one installation to the next [4]. These sequences within the military structure proceed during service. However, the process of leaving the military is not the same and can leave veterans feeling disconnected, abandoned, or resentful [4].

Veterans may have trouble with identity reintegration, therefore leading to onsets of adjustment disorder symptomology [5]. Guerrero et al. (2021) conducted a thematic analysis of veteran's identity and recovery in substance abuse homes [6]. This study expanded on how veterans endure a socialization process in the military that changes their self-concept and affects their post-discharge life. Many veterans view the "veteran identity" as salient and central to their identity [6]. Trepte & Loy (2017) discuss the Social Identity Theory (SIT) developed by Tajfel & Turner in 1979 [7]. SIT proposes people's behaviors based on their self-identification. SIT was used in research to observe themes related to veterans' post-military discharge and found veterans highly identified with their veteran identity as central to their self-concept [7].

Campbell (2023) reviews how military service members returning to the community experienced psychological pain [8]. Upon entering the military's training, the civilian 'self', is transitioned to be part of a collective whole and identification with the group (military members, units, and military as a whole) [8]. Once separated from the military body and into the civilian sector, it can cause a life-altering event and trigger a lonely process of individuation [8].

Greer (2020) completed a literature review on the context of female veterans transitioning into the civilian sector [9]. Female veterans' identity is unique adaption and reintegration compared to male veteran counterparts. Female veterans adopt strong military masculinity in their occupations. Female military members transitioning into the civilian context may experience different societal gender expectations that affect their identity formation [9]. Female veterans can face difficult stereotypes of their gender in the context of both the military and civilian sectors. Association of stereotypes and discrimination of “not being woman enough” or “not being veteran enough” [9]. The intersectionality of a veteran and female gender is a different experience for reintegration into the community. Female veterans face great reintegration difficulties transitioning from a soldier to a primary role as a wife, mother, and/or primary caretaker for the family [9].

Gerardi (1996) provides an occupational therapist perspective on the methodology to preserve military members' identity during battle fatigue [10]. Occupation rehabilitation uses a military-specific model to make the rehabilitation environment a military setting, rather than a medical setting, before returning to duty. The objective is to rehabilitate battle-fatigued soldiers and prevent identification with a “sick role,” maintaining the identification of a soldier, their military occupation specialty (MOS), and their military unit [10]. This approach emphasized the identity component for rehabilitation.

Smith & True (2014) focus their research on identity conflict for military veterans rather than focusing on the well-established clinical mental health diagnoses e.g., PTSD, mood disorders, etc. [11]. The term “warring identity” is a psychological term to explain the separation and disconnect of civilian and military identity [11]. This contributes to psychological distress for veterans but not to the extent of psychiatric criteria-based diagnosis. Thompson et al. (2019)

review the psychosocial adjustment issues for military veterans returning to the community [12]. The early years of post-military life are the most intense accompanied by higher rates of suicide, feelings of abandonment, and isolation [12]. All veterans in the study had higher reports of difficulty with readjustment, high suicidal ideation, and reported weak group identity associated with difficult readjustment [12]. Psychoeducational models and suggestions for identity reintegration can be part of transitional military programs. The U.S. Army has a brief 5-day transitional program (transitional assistance program[TAP]) for soldiers soon-to-be (less than 180 days) discharged from the military [13]. TAPS is a program with classes before civilian transition that discusses enrollment into the veteran administration and vocational adjustment [13]. However, this transitional program does not cover thoroughly psychoeducation, social determinants of health, (SDOH), identity, etc.

In summary, these studies aim to support and explore further with associated themes with identity and civilian adjustment. Specifically, for common themes between disruption with military identity and adjustment difficulty after transitioning into the civilian sector.

Methods and Data Collection

A qualitative method was used to identify themes related to veterans' identity and experience with their adjustment into the civilian sector. This study aimed to gather data from an interview questionnaire completed in person, via telephone, or Zoom (video call).

Setting and Participants

Before initiating interviews for data collection, approval was granted by an institutional review board (IRB) by the University of the Pacific (UOP). The sample for the population (U.S. military veterans) was collected by using a convenience and snowball sampling method. A flyer

was used to recruit veterans within the University of the Pacific, Sacramento, and Stockton Vet Centers, U.S. Veteran Affairs (VA) Vet Centers, and posted on social media. The recruitment flyer had information about the purpose of the study and contact information for the researcher (phone, email, zoom). Participants were offered an optional 'thank you card' with a \$5-10 dollar gift card for their participation.

The recruitment flyer had criteria to meet for the interview study: veterans of the U.S Armed Forces and no longer serving, served at least 180 days, served active duty, or activated reserves. Participants were given an additional pre-screening (email or phone) by the researcher to ensure minimum criteria were met before scheduling a time for an interview. During the interview, the participants were briefed on the purpose of the study, HIPAA confidentiality, and informed verbal consent to the study.

Measures

The interview was guided by an interview questionnaire prompt divided into a 2-part section. Part one of the interview collected social and military demographic information e.g., age, gender, race, ethnicity, military branch, rank of discharge, years served, deployments (combat and non-combat), service-connected disability, etc. Part two of the interview study was 10-12 open-ended questions that were recorded for data collection to identify key themes related to identity and adjustment into the civilian sector. Participants were given code names by the researcher and were advised to not use any identifiable information during the interview recording.

Data Collection

An electronic interview questionnaire was used to collect military and social demographic data, with a prompt of 10-12 open-ended questionnaires. The open-ended section of the interview questionnaire was recorded using computerized audio recording. After the study, the researcher wrote observation and reflection notes on each questionnaire the participant answered. Transcription of the audio was transferred onto a computerized application for text transcription. Audio recordings, interview questionnaire documents, and transcriptions were secured through computer passcode protection.

Analysis

The researcher reviewed each participant's audio-recorded transcription and interview questionnaire. An open coding method was utilized by the researcher to examine the participants' experiences based on their interview questions. A selection of words/themes was used to examine the transcription and to identify the participants' experience with their military identity and civilian adjustment. Specific words/themes from each participant's interview were analyzed to verify similarities. These themes were coded into separate sections into main themes and subthemes to clarify veterans' experiences. The researcher and the researcher's program faculty advisor used a triangulation method to verify themes that are related to the aim of the study.

Ethical Considerations

The researcher consulted with their university faculty advisor to consult on ethical considerations with the study. The researcher offered an optional follow-up phone call to review the study findings or any other related questions with the study. The study method required participants to reflect on past experiences in the military and their adjustment. Participants were

advised by the researcher they were not obligated to answer any question they did not feel comfortable with. Participants were advised they could back out of the study at any point of time during the interview and have any data collected destroyed. An electronic document with an overview of the study and mental health resources (emergency and non-emergency) was offered to the participants.

Results

Military Social Demographics

An analysis of the data resulted in interviewing sixteen U.S. military veterans. There was a diversity of social and military demographics. 4 branches of the military were represented: Army, Marines, Air Force, and Navy. Veterans' ages ranged from 25 years old to 60 years old. Veterans' identified their race as: 5 white, 3 Asian, 2 Black/White, 2 Black, 1 Native American, 1 White/Hispanic, 1 Middle Eastern, and 1 Hispanic. Veterans identified their gender as 12 male and 4 female. Education for veterans ranged from high school to master's degree. Years served in the military ranged from 3 years to 25 years. The rank at discharge from the military (lowest enlisted rank E-1 and highest E-9) ranged from E-4 to E-9. All 16 veterans in this study voluntarily disclosed they had a military service-connection disability. All veterans were on active duty or reserves activated for duty. All veterans in this study were assigned to at least one deployment (combat and/or non-combat) during their time in service (See Table 1). Veterans resided in different states of the nation e.g., California, Florida, Texas, Nevada, and New York.

Military Social Demographics

Table 1.

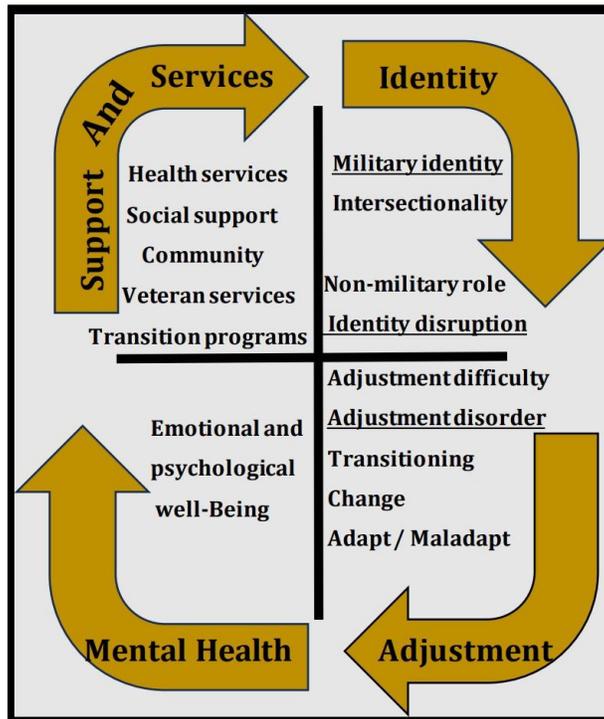
Veteran Code	Branch Of Service	Age	Gender	Race	Education	Deployments	Years Served	Service-connection rating	Rank at discharge
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1B	Army	30	Male	White	Associates	Cuba / Afghanistan	4	Yes	E-4
2C	Army	29	Male	Black/ White	Some College	Afghanistan	9	Yes	E-7
3R	Marines	36	Female	Native American	Some College	Korea	8	Yes	E-5
4F	Navy	31	Male	Middle-Eastern	Associates	Europe / Middle East	7	Yes	E-5
5R	Army	44	Male	Hispanic	Some College	Bosnia / Iraq / Cuba / Ukraine	24	Yes	E-9
6R	Navy	36	Female	Asian	Associates	Afghanistan / Kenya / Japan / Philippines / Indonesia / Fiji	14	Yes	E-6
7Y	Army	37	Male	Asian	Some College	Iraq	7	Yes	E-4
8W	Air force	51	Male	White/ Hispanic	Masters	Cuba / Haiti / Kuwait / Saudi Arabia / Korea / Spain / Somalia / Turkey / Afghanistan	21	Yes	E-7
9W	Air force	51	Male	White	Masters	Middle-east/ Afghanistan	21	Yes	E-8
10T	Army	60	Female	Black	Bachelors	Korea / Germany	10	Yes	E-5
11C	Army	54	Male	White	Masters	Iraq / Afghanistan	10	Yes	E-6
12C	Army	35	Male	Asian	Some College	Afghanistan / Haiti	4	Yes	E-5
13F	Air force	38	Male	Black	Masters	Iraq / Afghanistan / Qatar	20	Yes	E-7
14F	Army	47	Male	White	Masters	Iraq / Afghanistan / Kosovo	25	Yes	E-9
15F	Army	25	Male	Black/ White	High School	Korea	3	Yes	E-4
16M	Army	35	Female	White	Masters	Iraq	8	Yes	E-5

Findings

Many of the veterans in the study had similar themes that emerged from a thematic analysis of the interview transcriptions. Four main themes were discovered in the interview transcriptions: 1) Identity 2) Adjustment 3) Health and 4) Support and Services. Eight subthemes were related to each of the 4 main themes (See table 2). These main themes support this study’s goal of finding themes that relate to military identity (theme 1) and adjustment (theme 2). As depicted in Fig 1., mental health (theme 3) and support and service (theme 4) were additional themes that were discovered in the transcriptions that were present with one another.

Figure 1.



Theme #1: Identity

Veterans were asked how the military was a factor in shaping their identity. To understand their experiences, veterans were asked what motives led them to join the military,

their experience during the service as a military member, and their transition into the civilian sector as a military veteran.

What led you to join the military?

Veterans shared their reasons for what led them to join the military. Veterans shared common themes with having a purpose, honor, serving our country, providing, personal growth, and having a direction in life.

Veteran 3R: “...My grandfather was a combat veteran in Korea, and I had four other cousins who were in the military, so there was a family influence,..I wanted to serve my community in some capacity, but I also wanted to serve my country... I wanted to be able to have more discipline and structure in my life. I wanted to learn skill sets...”

Veteran 5R: “...For me, I was a teenage father... And I knew the military offered, like, steady pay, job, which could hopefully transition to a civilian career, medical benefits and all that...”

Veteran 2C: “...Actually, believe it or not, I think it was more so a matter of I didn't have any direction. So, I figured I would join the military...”

How did your experience in the military shape your identity?

Veterans discussed their experiences adopting a military identity. The experiences based on a thematic analysis showed a high presence on the subthemes of military identity e.g., military expectations, values, structure, unit system, discipline, and masculinity.

Veteran 10T: “...It was challenging because I was African American and a woman...the military is kind of a macho male thing, and here I am a woman coming into the army...”

Veteran 13F: "...it provided the discipline that was needed at an early age as far as my identity and allowed me to use those experiences to figure out who I wanted to be...it has allowed me to progress over 20 years..."

Veteran 16M: "...They say that less than 1% is served in the military, so, I mean, I feel like that's kind of makes you, like, you develop this sense of confidence...I'm part of this really niche and beautiful community..."

What do you miss most from the military?

Veterans reflected on what they missed most from the military and the majority held common themes of their military identity and group identification with other military members. Veterans reflected on missing the camaraderie, structure, purpose, "operational tempo", and a unified mission objective.

Veteran 12C: "...My brothers, the camaraderie. There's nothing like it..."

Veteran 15F: "...What I miss most 100% is the camaraderie of a brotherhood because just like sports and anything team-related, the military creates that for you because you build friendships while going through tough experiences..."

Veterans 10T and 5R discussed the subtheme of operational tempo and being unified.

Veteran 10T: "...We are bound to believe that we are brothers and sisters in Arm, and so it's one for all and all for one...we are still bound by that green camouflage uniform that we are one. Outside of that, as in the civilian, I don't really see that too much..."

*Veteran 5R: "...I miss the controlled chaos...sometimes it's high pressure... I felt like I was able to thrive in it..and then I miss my boys. Like, that camaraderie. You can't find that s*** nowhere else..."*

Theme #2: Adjustment

Veterans were asked to reflect on their adjustment into the civilian sector post-military discharge. Specifically, veterans were asked about their adjustment to transitioning their military identity into the civilian sector. There were themes of difficulty with adjustment (post-military) and their identity.

After the military, how was your experience transitioning your military identity in the civilian sector?

There were notable subthemes of identity disruption and adjustment difficulty for veterans transitioning into the civilian sector. Veterans experienced a range of difficulties finding their place in the civilian sector as U.S. military veterans.

Veteran 11C: "...It's the most difficult thing that I've ever experienced... The best way I can describe it is I felt like an alien..."

Veteran 6R: "...it was kind of hard. It was sad. I had to reach out to a therapist so that I could talk to her about transitioning...You don't put the uniform on anymore, and so in the daytime, you don't feel like, well, I didn't feel like that purpose..."

Veteran 2C: "...I think, man, there was just, like, that huge identity crisis, really. When I first got out, I realized that I was no longer a soldier, which is, like, obviously right..."

Veterans who did not have difficulty transitioning their military identity in the civilian sector did report having themes of social support, continued identification with the military, and surrounded themselves with military-affiliated peers/organizations. This supports the importance and continued self-identification with the military after their discharge.

Veteran 8W: "...You know, I don't I don't really associate with a whole lot of civilians. Most of my friends are veterans...If I wasn't still working around the military as a contractor, I know I'd feel more hollow..."

Veteran 14F: "...I think I was very lucky because the guy that brought me into the company was a management training program, so it was basically paid intern. This company really focuses on bringing in ex-military for those positions... It was definitely a change, but I really had a guide that entire first year to answer all of my questions..."

Theme #3: Mental Health

Veterans were asked about their mental health when they were discharged from the military. Specifically, veterans were asked questions that were reframed from adjustment disorder criteria under trauma-stressor-related disorders by the Diagnostic and Statistical Manual for Mental Disorders 5-TR [5]. There were themes present of their health, social roles, and quality of life affected after they transition from the military.

Did you experience any emotional or behavioral challenges after your military discharge? If yes, when did this start to happen after your discharge?

Veterans were first asked if they experienced any emotional or behavioral challenges post-military discharge. This question is reframed from adjustment disorder criteria section A) the development of emotional or behavioral symptoms in response to an identifiable stressor(s)

occurring within 3 months of the onset of the stressor(s). Veterans responded with themes that were related to emotional and behavioral concerns after their military discharge.

Veteran 12C: “...Yes, 100%..Immediately after discharge. I was in a ten-year relationship, and she was telling me I'm crazy, I have anger management issues. I need to go talk to someone. I need to go see a therapist. It was just hard adjusting...”

*Veteran 16M: “...I was angry all the time. When I say angry, I have anger outbursts to the point where it's super ridiculous. I didn't f***** care who it was. I was going to yell at you right then and there, and I don't care where we were... you mess with me, it was not fun...”*

Veteran 2C: “...after a couple of months, man, everything just kind of settled and emotionally, for sure. I was really depressed for at least eight months. I mean, it was just hard to get out of bed...it was like my whole world had shifted...”

If did have distress, did this effect important parts of your life? Example: relationships, social roles, occupation, etc.

Veterans were asked a follow-up question if their distress affected important parts of their life. This question was also reframed from adjustment disorder criteria 2B) significant impairment in social, occupational, or other important areas of functioning [6]. Veterans reported themes of distress with their social roles, daily role functioning, and relationships.

Veteran 7Y: “...Yes. Affected just about every aspect of it...”

Veteran 11C: “...I know that my wife, my partner in life, is very aware of who I am and what I'm feeling, and so she was affected greatly...”

Veteran 3R: "...It affected my marriage. It affected my ability to work. It affected my relationship with my family. Like, my mom and I were not getting along very well because I had so much anger..."

Theme #4: Support and Service

Veterans were asked if they received any psychological, readjustment, or transition services for their post-military discharge phase. Veterans who did engage in services shared their experiences and how helpful it was for their health and transition.

Veteran 12C: "...I went to a VA clinic, did my anger management classes. I did a lot of one-on-one classes. I did a lot of group classes. I did it for about a year. Definitely helped hearing advice from other veterans, and I got better. talking and being around other veterans, letting it out... I went to Afghanistan. I was there for 15 months. I had a lot of close friends die..."

Veteran 16M: "...I started having a therapist and going on medication. And you do the whole thing where you do the trial and error as far as medication goes. And I finally found one that really works for me and keeps me stable. And I've been in therapy since..."

Other veterans shared their experiences of not receiving any psychological or mental health services after their military discharge or having a dissatisfied experience.

Veteran 10Y: "...I did not. I think for some people, maybe they should have been some type of debriefing or exit training to help get them, because I've seen other people who identity was all military. That was it. So when they got out, they did not know how to react or how to do or how to integrate back there..."

Veteran 8W: "...I was seen by the VA for counseling one time..."

What do you wish you would have known or had access that would have made your military-civilian transition better?

Veterans were asked in retrospect what would have made their civilian adjustment better. There were common narrative themes of mental health, networking, connection with military peers, and military-affiliated people. These themes support the continued self and group identification with military identity.

Veteran 6R: "... if I had more people that were not just Taps (transition assistance program) class but veteran advocates that are available on base or we were introduced to them earlier on, I think that would have definitely helped..."

Veteran 14F: "... after preparing myself to what I thought was the highest I could possibly prepare myself as far as education and certification, whatever, and then throwing resumes out blindly at companies and just never getting an answer back. Just understand the connections, like making the connections with the people..."

Veteran 2C: "... I would have definitely taken this much more time to just make sure that I was honest with myself about where I was emotionally, spiritually, mentally, everything..."

Table 2.

Code #	Theme	Subtheme	Child theme	Code Description
1	Identity	Military Identity	Operational tempo / Mission / Camaraderie / Structure/ Purpose/ Honor	The strongly held self-identification with the veteran's military role/veterans' different experiences with how the military developed their identity/group identification with other military members or veterans/Operational tempo with their

				military roles/to serve and have honor for our country
2		Intersectionality	Race, ethnicity, social class, gender, sex, nationality, etc.	How a veteran's intersectionality was a factor before, during, and/or after their military experience/power and privileges/discrimination and prejudice
3		Social Role (non-military)	Parent, scholar, civilian occupation, mentor, etc.	Other social roles and responsibilities outside of the military role.
4		Identity Disruption	Out of place/ unrelatable/ Disconnected/ Lost/ Bereavement	The difficulty with veterans transitioning their military identity roles into the civilian sector/feeling out of place/disconnected from others
5	Adjustment	Transitioning/ Adapt/ Maladapt Change		Acclimating into a different social, cultural, and systemic environment
6		Adjustment disorder/Adjustment difficulty	Problems with social roles and mental health	Challenges for veterans adjusting to the civilian sector's environment and negatively affecting mental health and social roles/ reframed questions of adjustment disorder DSM-5-TR criteria
7	Mental Health			Experiences with their mental health range from emotional and psychological well-being
8	Support and Services	Transition programs/ health services/social support/community/ veteran services		What helped or could have helped veterans transition into the civilian sector/social support/mental health services/civilian system navigation/Veteran Affairs or military-based

				organizations/mental and medical health
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Discussion

Overall, the study supported the impact of a military member's identity and adjustment in the civilian sector after discharge. This study contributes to identity disruption for military veterans and difficulty reintegrating back into civilian society. The study found themes of identity disruption and adjustment difficulty post-military discharge. Specifically, veterans who reported themes of identity disruption also reported themes related to the reframed questions of adjustment disorder criteria under trauma-stressor-related disorders from the DSM-5-TR [5]. This affected the mental health and transition of military veterans which also affected their roles, relationships, family members, and quality of life. Veterans who did not report themes of identity disruption continued to have self-identification and group identification with military-affiliated organizations, personnel, values, and expectations. In addition, veterans who did not have difficulty adjusting did report having themes of social support, continued identification with the military, and surrounded themselves with military-affiliated peers/organizations.

The study supports the factor of military identity as a continued centralized role within their lives. In the perspective of identity as a continuum, veterans strongly self-identified with their military roles, expectations, and values. Upon entering the military, during service, and after military discharge. The support and services veterans experienced were a combination of satisfactory, unsatisfied, or did not seek services. However, there were consistent subthemes that recommended having mental health services, networking, veteran advocates, social connection, education, and continued identification with military-related organizations/personnel.

Study Limitations

There were several limitations to this study. The sample representing this large population was sixteen military veterans who were pooled from snowball and convenience sampling methods. All veterans were enlisted, and no prior commissioned officers were available to be pooled into the study. In addition, this study is a qualitative approach using theoretical concepts of identity to match relatable themes that were not quantified. The presence of other possible underlying mental health symptomology post-military transition e.g., substance abuse, depressive disorders, posttraumatic stress disorder, etc., or medical symptoms that can contribute to psychological difficulties. Each participant's service gap (post-discharge to present date of study) and length of service were different between each veteran within the sample group. No correlation method was used to determine a relationship between their length of service and reports of identity disruption and/or adjustment difficulty.

Future Considerations

The study supports the construct of identity as an important factor for veterans' mental health and civilian readjustment. Research on military veterans may have to consider how disruption with identity is related to other mental health symptomology. The sample was diverse in branches of the U.S. Armed Forces, race/ethnicity, gender, age, military occupation specialty (MOS), military deployments, rank at discharge, and level of education. Therefore, future research should consider having/expanding diversity within research to relate to the general population of veterans. Quantitative and mixed-methods studies should also be considered when considering identity as a variable. Future research may want to prepare for psychological distress that can arise from veterans reflecting on their military experiences.

Implications

The study helps support the existing knowledge of education and services for veterans and military-civilian transition. Professionals and peer counselors in the social behavioral health field can use this study's information during readjustment services e.g., vocation, counseling, therapy, navigation, etc.

Recommendations

It is recommended to add a quantitative or mixed methods study design to further support these study findings. Diversity of intersectionality and military experience is also recommended to help generalize these study findings with the larger veteran population. Future research should consider rapport building, assessing safety, proper referrals, and honoring the veterans for taking the time to share their vulnerability.

Conclusion

The study supports the study's aims for assessing themes that are related to identity and adjustment into the civilian sector. The four main themes analyzed through transcription coding methods were 1) identity 2) adjustment 3) mental health and 4) support and services. Veterans in this study showed themes of the military developing their identity. Similar subthemes reported by veterans in this study related to their military identity: "operational tempo," mission, camaraderie, purpose, structure, and honor. Veterans discharged from the military reported subthemes of identity disruption and answered positively to reframed questions of adjustment disorder criteria under trauma stressor-related disorders from the DSM5-TR [6].

Veterans who did not report themes of either identity disruption or adjustment disorder continued to surround themselves with social support and military-affiliated peers/organizations.

This supports the continued self-concept and group identification with the military that possibly served as a buffer from themes of identity disruption and/or adjustment disorder. Veterans shared their thoughts on what would have helped their transition into the civilian sector and reported different services/support: the importance of networking, mental health services/education, system navigation, connection with military peers, military-affiliated organizations, and veteran advocates/representatives for civilian-veteran navigation.

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