

Research Brief

Civilian Employment Among Recently Returning Afghanistan and Iraq National Guard Veterans

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Research Highlights:

- National Guard and Reserve veterans of OEF and OIF experience high rates of mental health and substance abuse problems upon their return from duty. Compared to 20% of active duty service members, 42% of National Guard and Reserve members report a mental health problem upon return.
- Researchers found that with a month remaining in their leave period, only 41% of service members were employed; however, of those who were working, almost 80% were employed fulltime. Veterans who were less likely to be employed were young, female, unmarried, had a high school education or less, and had poor mental health status. Recent combat exposure and having been deployed multiple times increased the likelihood of employment.
- Mental health status may not be strongly associated with initiating civilian employment among National Guard service members; however, better mental health status is associated with being employed fulltime versus part time.

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Abstract:

“Objective: National Guard service members face deactivation from active duty soon after they return to the United States and rapid entry into the civilian workforce; therefore, it is important to examine employment among these Veterans. Methods: The sample included 585 National Guard service members. Bivariate and multivariable analyses were conducted examining the associations between mental health symptoms, alcohol use, number of deployments, and combat exposure with employment status and full-time versus part-time employment as outcomes. Results: Forty-one percent of National Guard service members were employed 45 to 60 days following demobilization. Among those who were employed, 79% were employed full-time. Age, family income, and combat exposure were associated with employment; income and health status were associated with part-time versus full-time employment. Conclusions: Mental health status may not be strongly associated with initiating civilian employment among National Guard service members; however, better mental health status is associated with being employed full-time versus part-time.”

Implications

For Practice

OEF and OIF veterans have been shown to have higher rates of unemployment than both civilians and veterans from other eras. This study, one of the first to explore recently returned OIF/OEF veterans' entrance into the civilian workforce, focuses on National Guard and Reserve service members because they must enter the civilian workforce quickly upon leaving active duty and face unique challenges in finding and retaining employment. Researchers found that less than half of National Guard service members surveyed had obtained employment by 45-60 days post-mobilization. Of those entering the workforce within this time frame, several service members reported alcohol misuse, recent combat exposures, multiple deployments, and significant mental health problems. Although not associated with obtaining employment in this study, past studies suggest mental health status is associated with maintaining employment long term, as well as being employed fulltime versus part time. Therefore, both employers and the Department of Veterans Affairs (VA) should increase support for veterans with mental health problems. The VA can extend service hours to accommodate the schedules of working veterans, as well as provide support groups where veterans can discuss the challenges of life in the civilian workforce with other veterans and professionals. Interventions should address both mental health and vocational needs for veterans working both full- and part time.

For Policy

Current policies concerning veterans' employment initiatives should be expanded to include a larger number of veterans. Results of this study show that in addition to veterans with poorer mental health status, younger veterans, those with lower incomes, female veterans, those who were unmarried, and those with a high school education or less need additional assistance in attaining fulltime employment post-mobilization. Some VA initiatives, including vocational rehabilitation and compensated work therapy programs, exclude veterans without a psychiatric diagnosis and/or a service-connected disability. Expanding the criteria for eligibility in these programs would be beneficial for a substantial number of service members. Alternatively, policy makers could initiate new employment and educational support services especially for recently returning OIF/OEF veterans, veterans with employment difficulties before deployment, and younger veterans. Younger veterans should also be encouraged to use GI Bill benefits as higher educational attainment can increase career opportunities.

For Future Research

Researchers collected data for this study from a sample of Midwestern National Guard service members; however, only 60% of those approached completed the survey. Participant bias may be present among those who completed the survey, as there was no data available from non-completers. In future studies, information should be collected from all potential participants so that any respondent bias can be highlighted. Future research should gather information on service members entering the civilian workforce beyond the first 45-60 days post-deactivation, the time period focused on in this study. A longitudinal study can provide information detailing National Guard veterans' later experiences, contrasting these experiences with those found in the earlier 45-60 day time frame. Researchers can further improve upon this study by drawing a nationally representative sample of National Guard service members and including information on service members' employment status prior to deployment, which can affect employment opportunities upon return from duty. Finally, future studies can improve measurements using more objective reporting for mental health symptoms and employment status, as this information was provided by study participants and may not be completely accurate due to poor recollection or concerns about stigma.

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