

Research Brief

U.S. Military Veterans Transition to College: Combat, PTSD, and alienation on campus

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Research Highlights:

- Student veterans from the Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) conflicts face mental and physical injuries, a sense of loss in parting from their unit, and additional challenges of adjusting to college life. This paper uses stress process theory to explore the effects of various stressors and resources on student veterans' campus experiences.
- Veterans exposed to more combat and those with functional limitations showed more symptoms of PTSD, while those with more social support had fewer symptoms. Increased PTSD symptoms led to problems with alcohol, strain in intimate relationships, and more alienation on campus. Sources of alienation on campus included feeling unfairly judged in the classroom and uncomfortable in crowded settings.
- Campuses can support student veterans by providing professionally-staffed student counseling and disability resource centers trained in addressing combat stress and chronic disability, training for faculty members, and learning communities for student veterans.

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Abstract:

“U.S. universities are witnessing an influx of student veterans who have been under chronic stress, have suffered injuries, and currently exhibit symptoms of Post-Traumatic Stress Disorder (PTSD). This study utilized quantitative survey data to test a model of what causes alienation on campus among student veterans. We then present quotations from student veterans describing the types of situations they find alienating. The results have direct implications for how student affairs professionals may help veterans succeed in college.”

Implications

For Practice

On campus initiatives should focus on social integration for student veterans, as many have stated that they do not fit in on campus or feel unfairly judged by faculty and their peers. Campuses can address these issues by increasing awareness of issues sensitive to veterans and offering training for faculty and students, whether optional or mandatory. Campuses can also combat alienation of student veterans by actively discouraging any denigration of service members by faculty members and students. Student veterans may also benefit from learning communities established to create a more integrative environment on campus. In learning communities, a team of faculty members and student affairs professionals would work together to teach classes for veteran students. Veterans would take certain classes together, allowing them to collaborate with faculty and each other. This would also allow faculty and student affairs staff to identify and offer support to students experiencing greater difficulties transitioning to life on campus, focusing especially on the needs of veterans with PTSD and other health issues. Colleges and universities can also set up peer mentorships, sponsor veteran-friendly organizations, and dedicate a physical space for student veterans on campus.

For Policy

Student veterans with chronic disabilities, service-related injuries, symptoms of PTSD, or other functional limitations should be able to seek out resources on campus. Policymakers can insure that educational institutions with student counseling and resource centers staff those centers with trained professionals. Counseling and resource center staff should be trained in addressing issues specific to veterans, including the long-term effects of combat stress, physical and psychological concerns associated with chronic disabilities, and PTSD. Policymakers should also work to create alliances between the Veterans Administration and educational institutions so that student veterans can easily be referred to off-campus VA resources for services not provided by their colleges or universities. Overall, policies should aim to facilitate veterans' educational success by meeting their financial, social and health needs on campus, and providing off campus resources when necessary.

For Future Research

In future studies, researchers should use longitudinal data to investigate the relationship between combat experiences, available resources, and the severity of mental health problems over time. Because this study was cross-sectional, the authors are unable to account for the evolution of veterans' mental health problems over time. The low response rate in this study, with less than half of those surveyed responding, could indicate a systematic bias or characteristics that significantly differentiate non-responders from those who responded to the survey. Non-responders may not have participated because of more severe PTSD, other health issues, or because they felt stigmatized, which would make the results of this study less accurate in measuring veteran students' health and feelings of alienation. Researchers should continue to investigate the ways in which stressors and resources converge to influence student veterans' mental health. Although military service includes multiple severe stressors, there are also beneficial resources, such as lasting camaraderie and social support among members of a unit. Future research should account for these factors and the ways in which they influence military service members' vulnerability to PTSD and other mental health problems. Finally, researchers should aim for larger sample sizes in future studies, and data that focus on identifying the veteran populations most at risk and ways to help them.

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